

PHEP Performance Measure Data Collection Tool User Guide

General Information

Purpose of Data Collection Tool

- Collects all data required for PERFORMS reporting:
 - > Capability 1: Community Preparedness
 - > Capability 3: Emergency Operations Coordination
 - > Capability 4: Emergency Public Information and Warning
 - > Capability 13: Surveillance and Epidemiological Investigation
 - > Laboratory: PFGE
- Aggregates data at the Awardee level and generates reports to facilitate data entry in PERFORMS.
- Provides recommendation for **best demonstration** of capability which considers the relative complexity of the response and response time.
- Supports on-line, real time data entry by awardees and local level partners for Community Preparedness and Surveillance and Epidemiological Investigation performance measures and aggregates data for Awardee level.

Advantages of Data Collection Tool

- Eliminates duplicate data entry.
- Incorporates edit checks, drop down menus and branching for accuracy and convenience.
- Highlights incomplete data fields to facilitate data entry.
- Provides explanation for ineligibility of performance measures for reporting.
- All information associated with the awardee including local level data is maintained in a database which can be aggregated for annual reporting.
- Data cannot be viewed by CDC or other awardees.

Assistance

- For information on required technologies to support this tool, click on the information icon in the upper right hand corner of the screen.
- For assistance, contact the PHEP PM helpline at 1-866-698-5976.
- NOTE: The Data Collection Tool does not substitute for data entry in PERFORMS. This tool facilitates data collection for reporting.

Accessing the Data Collection Tool

- Website: <http://pheppm-tool.jsi.com>
- Requires Login and password provided by Awardee Administrator.
- Menu options are established by Awardee Administrator based on user's data entry role. Data entry roles may be restricted to one or more of the following:
 - > Community Preparedness (CP)
 - > EOC—Staff Assembly
 - > EOC—Incident Action Plan
 - > EOC—After Action Report and Improvement Plan
 - > EPIW— Public Message Dissemination
 - > Laboratory (LAB)
 - > Surveillance (SURV)
 - > Epidemiological Investigation (EI)
- Menu options are listed on the left navigation bar and include Data Entry and Report.
 - > Data Entry: permits data entry for all applicable performance measure data
 - > Report: aggregates data at Awardee level and generates reports for data entry in PERFORMS.
- To exit, click “Logoff” at the bottom of the left menu.
- If you forget your userid or password, click on “Forgot?” on login page.



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Administrator Awardee Set Up Functions

Manage

- The Manage function is only available to the Awardee Administrator and is used to update organizational level information. Manage functions include:
 - > Disease Constraints—provides state level information on six diseases required for reporting surveillance performance measures.
 - > Background Information—captures information on systems and quality improvement activities required for reporting Community Preparedness, Surveillance and Epidemiological Investigation performance measures.
 - > Health Departments and Users—establishes userids and passwords for awardee and local health department staff and data entry access by individual users.

Disease Constraints

- Disease Constraints have default values which should be updated with state specific criteria. Data must be updated before data entry.
- To update, click on the “Disease Constraints” menu option on the left. Click on the disease and complete the required information.
- For each disease, provide information on case event date type and reporting time frame for hospitals, providers and laboratories.
- Press the “Submit” button to update information.

Background Information

- Additional questions are included for CP and SURV and EI activities. Awardee Administrator must complete these sections before generating final reports for these capabilities.
- To update, click on the “Background Information” menu option on the left. Answer the questions for the Awardee and Local Health Departments. See the specific capability for further instructions.
- Press the “submit” button to update information.

Establishing Userid and Passwords

- CDC will provide “administrator” userid and password for each awardee.
- Awardee “administrator” establishes userid and password for as many state and/or local health department staff as needed.
- Awardee “administrator” establishes level of access for each user based on data entry role; user access is defined by userid and password.
- To Create or Modify an **Awardee User**: Select “Manage”, “Health Dept & Users”, “Awardee Users” from left menu:
 - > To add: Click on “Add Awardee User “ and complete required information. Be sure to check which roles the user has access to from the list provided on the left.
 - > To delete: Click on the check box next to the user to be deleted and select “Delete Awardee User”.
 - > To change user information: Click on the name of the user and update information.
 - > NOTE: A user with a lock next to their name cannot be deleted because other users are associated with this person.
- To Create or Modify a **Local Health Department (LHD) User**:
 - > The LHD must be established first. Select “Manage”, “Health Dept & Users”, “LHD” from left menu.
 - > After the LHD is established, LHD users can be established by selecting “Manage”, “Health Dept & Users”, “LHD Users” from left menu. You will need to associate the LHD User with a LHD.
 - > Follow instructions for Awardee above to add, delete or change information.
 - > NOTE: LHD users have access to CP, SURV and EI data entry and reporting, only.

After completing data entry on a screen, click on the “Submit “ button at the bottom of the page to save information.

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Capability 1: Community Preparedness

(Id of Key Organizations, Engagement in Determining Risk, Engagement in PHEP, Engagement in Recovery Planning)

Data Entry

- CP performance measures are associated with key organizations. To create a **Key Organization**: Select “Data Entry”, “CAP 1: CP” from left menu.
- A list of previously entered organizations will appear on the screen. Note that the Awardee will see all organizations entered by local health departments. The local health department will only view organizations entered at the local level.
 - > To add: Click on “Add Key Organization “ and complete all required information.
 - > To delete: Click on the check box next to the key organization to be deleted and select “Delete Key Organization(s)”.
 - > To change or update key organization information: Click on the name of the organization from the list.
 - > NOTE: You cannot save a key organization that is missing required (*) information.
- **Optional:** For PERFORMS reporting, key organizations are associated with 11 sectors. This online tool captures a second level of detail to describe types of organizations represented by the health care sector.

After completing data entry on a screen, click on the “Submit” button at the bottom of the page to save information.

Reports

- Reports can be produced for the LHD and Awardee. To generate reports in pdf, go to “Reports”, “CAP 1: CP” and select the desired report from the list.
 - > **LHD Reports:** The data reported in these reports includes information entered by the LHD, only.
 - > **Awardee Reports:** The Awardee can print reports for the preselected sample of LHDs to facilitate data entry in PERFORMS. Two additional reports are available in table format that summarize Key Organizations by Sector for the preselected sample and all LHDs.

For Awardee Administrator, only

- The CP data entry and reporting functions have been designed to permit **both** data collection and reporting for the preselected sample of LHDs as well as additional LHDs. The Awardee may choose to collect information from LHDs that are not included in the preselected sample. Separate reports can be generated for the preselected sample and all LHDs for which data is collected.
 - > The Awardee must identify which LHDs are included in the preselected sample for purposes of reporting to CDC. To select LHDs to be included in PERFORMS reporting, go to “Manage”, “Background info”, “LHDs”, “CAP 1: CP”. A list of LHDs that have entered CP data will appear on the screen. Click on each of the LHDs and indicate “Yes” or “No” if the LHD will be included in the 1) reporting for the budget period and 2) CDC preselected sample. Provide a brief explanation for why the LHD is included or excluded in the sample if different from CDC’s expectation.
 - > NOTE: If no LHDs exist in the Awardees’ jurisdiction, the Awardee must establish itself as an LHD to report organizations.
- **Updating Background Information:** To complete CP reporting for PERFORMS, the Awardee Administrator must answer questions on the successes and barriers cited by LHDs. These questions should be completed at the end of the reporting period but before generating reports.
 - > Answers to required questions should be prepared after reviewing responses provided by LHDs in the reporting sample. To view, go to “Manage”, “Background info”, “LHDs”, “CAP 1: CP” and select the LHD from the list on the screen to view its responses to the questions. Note that the LHDs’ responses are read-only.
 - > After reviewing all applicable LHD responses (e.g., LHDs in the preselected sample if generating a report for reporting in PERFORMS), summarize and draft responses to the questions that reflect the experience of the LHDs. To enter aggregate responses to required questions, go to “Manage”, “Background info”, “Awardee”, “CAP 1: CP”.

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Capability 3&4 Emergency Operations Coordination (Staff Assembly, Priority Goal, IAP, AAR/IP) and Emergency Public Information and Warning (Message Dissemination)

Data Entry

- EOC and EPIW data collection is only available at the Awardee level. Local level reporting is not permitted for these capabilities.
- EOC and EPIW performance measures are associated with an incident, although not all incidents are eligible to report all performance measures. To create an **Incident**: Select “Data Entry”, “CAP 3&4: EOC & EPIW” from left menu:
 - > To add: Click on “Add Incident” and complete all required information under the “Incident-General” tab. Tabs will appear for each performance measure eligible for reporting for the incident. Click on the tab and complete the information requested.
 - > To delete: Click on the check box next to the incident to be deleted and select “Delete Incident”.
 - > To change or update incident information: For each incident, the status of data entry for all performance measures is provided including n/a (not applicable or ineligible), complete and incomplete. Click “incomplete” for a list of missing information. Data can be changed for any incident by clicking on the incident name and updating responses to the information requested.
 - > NOTE: You cannot save an incident that is missing required (*) information.

After completing data entry on a screen, click on the “Submit” button at the bottom of the page to save information.

Reports

Reports are generated in pdf and opened in a new window or tab. Two types of reports are available:

- **Templates:** A template can be printed for any eligible performance measure. The template prints in the format required to complete data entry in PERFORMS. To generate a **Template**: Select “Report”, “CAP 3&4: EOC & EPIW”, “Template” from the left menu.
 - > A list of incidents will appear on the screen.

Reports—cont.

- > For each incident, the performance measures which are eligible for reporting for the current reporting period are designated “eligible”.
 - For information on why a performance measure is not eligible for reporting, mouse over “ineligible” and a tooltip will appear with reason(s) why the measure is ineligible.
- > Select one or more report to run by clicking on the box next to the “eligible” label or select the entire incident by clicking on the box next to the incident name. Click on the button “Run EOC & EPIW Report”.
- **End of Year Summary:** Reports aggregate data for all activity performed during the reporting year that satisfies inclusion criteria. To generate an End of Year Summary Report: Select “Report”, “CAP 3&4: EOC& EPIW”, “End of Year Summary”, and the desired Performance Measure from the left menu.
- Four performance measures require reporting of your **best demonstration**. The Online Tool uses an algorithm to rank incidents based on components of complexity (see fact sheet on Selecting a “Best” Demonstration). For these performance measures:
 - > The report screen lists all incidents that are eligible to report a best demonstration for the performance measure in approximate rank order of complexity.
 - > To print the End of Year Summary which includes the incident as the best demonstration, click on the “Generate” link corresponding with the selected incident.
 - > NOTE: Selection of your best demonstration is subjective. You may choose any of the eligible incidents. Consider the “approx. rank” a guide, only.

For the **HHS Priority Goal**, the report screen lists all incidents that met the reporting criteria for staff assembly within 60 minutes in order of the shortest assembly time.

- > If no incident met the reporting criteria of assembly within 60 minutes, the incident reported with the quickest staff assembly time is provided.

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Capability 13: Surveillance (Disease Reporting and Disease Control) and Epidemiological Investigation (Investigation Reports and Reports with Minimal Elements)

Data Entry

- **Surveillance (SURV):** SURV performance measures are associated with disease reports. Data is ONLY collected for –Botulism, Tularemia, *E.coli*, Hepatitis A, Measles and Meningococcal disease. To create a Disease Report: Select “Data Entry”, “CAP 13: SURV & EI”, “SURV” from left menu.
- A list of previously entered disease reports will appear on the screen. Note that the Awardee will see all disease reports entered by local health departments. The local health department will only view disease reports entered at the local level.
 - > To add: Click on “Add Disease Report” and complete all required information. Ensure disease reports exclude duplicates.
 - > To delete: Click on the check box next to the disease report to be deleted and select “Delete Disease Report”.
 - > To change or update a disease report: Data can be changed for any disease report by clicking on the Disease Report and updating responses to the information requested.
 - > NOTE: You cannot save a disease report that is missing required (*) information.
- **Epidemiological Investigation (EI):** EI performance measures are associated with investigations. To create an Investigation: Select “Data Entry”, “CAP 13: SURV & EI”, “EI” from left menu. Follow the instructions above for adding, deleting or changing an investigation.
 - > NOTE: All investigations are characterized as an Infectious Disease Outbreak or an Environmental Exposure. LHDs do not report Environ. Exposures.

Reports

- Reports can be produced for the LHD and Awardee. To generate reports in pdf, go to “Reports”, “CAP 13: SURV& EI” and select the desired report from the list.
 - > **LHD Reports:** The data reported in these reports includes information entered by the LHD, only.

- > **Awardee Reports:** SURV and EI reports are available in two formats: All and Sample. The “Sample” reports only include data for the preselected sample of LHDs; the “All” reports include all LHDs who have reported data. EI Exposure Reports are only available at the Awardee level.

For Awardee Administrator, only

- The SURV and EI data entry and reporting functions have been designed to permit **both** data collection and reporting for the preselected sample of LHDs as well as additional LHDs. The Awardee may choose to collect information from LHDs that are not included in the preselected sample. Separate reports can be generated for the preselected sample and all LHDs for which data is collected.
 - > The Awardee must identify which LHDs are included in the preselected sample for purposes of reporting to CDC. To select LHDs to be included in PERFORMS reporting, go to “Manage”, “Background info”, “LHDs”, “CAP 13: SURV & EI”. A list of LHDs that have entered SURV & EI data will appear on the screen. Click on each of the LHDs and indicate “Yes” or “No” if the LHD will be included in the 1) reporting for the budget period and 2) CDC preselected sample. Provide a brief explanation for why the LHD is included or excluded in the sample, if different from CDC’s expectation.
- **Updating Disease Constraints:** Before entering SURV performance measure data, select “Manage”, “Disease Constraints” from the left menu. See page 2 for instructions on updating disease constraints.
- **Updating Background Information:** To complete SURV and EI reporting for PERFORMS, the Awardee Administrator must answer questions on processes and procedures in place to support program improvement. These questions should be completed at the end of the reporting period but before generating reports.
 - Answers to required questions provided by LHDs can be viewed by selecting, “Manage”, “Background info”, “LHDs”, “CAP 13: SURV & EI” from the left menu. Answers are read-only and are aggregated automatically and included in Awardee reports.