Centers for Disease Control and Prevention

Moderator: Raffi Standifer
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2 pm CT

Coordinator: I'd like to thank all participants for joining the call today. We'll begin in about three minutes. Again thank you for joining the call today. We'll begin in about three minutes.

Pause

Coordinator: Welcome and thank you for standing by. At this time, all participants are in a listen only mode until the question-and-answer session of today's conference. At that time, you may press star 1 on your phone to ask a question.

I'd like to inform all parties that today's conference is being recorded. If you have any objections, you may disconnect at this time. I'd now like to turn the conference over to Michelle Hoover. Thank you. You may begin.

Michelle Hoover: Good afternoon everyone. On behalf of my colleagues and myself, we'd like to welcome you to this afternoon's demonstration of the REDCap Quarterly Reporting tool for the opioid crisis cooperative agreement.

I'll walk through the agenda but I want to remind folks if you could please - you'll notice that we do have a poll available. The poll will ask you two questions, who you are, what state you're from and then it'll ask you which of the work plans are funded in your state. This will give us a better idea of who's on the call.

So, behalf of both the National Center for Injury Prevention and Control and the National Center for HIV AIDS Viral Hepatitis STD and TB prevention and Centers for Surveillance Epidemiology and Laboratory Services, the purpose of this call is to demonstrate the Research Electronic Data Capture forms or REDCap that will be used for quarterly reporting and performance measures.

We'll also have a question and answer session that'll help clarify expectations and answer any additional questions that you may have. The overview and demonstration at the National Center for Injury Prevention and Control portion of this discussion will be done by Wendy Heirendt who is a Senior Public Health Advisor on detail to the Division of Unintentional Injury and Prevention, sorry.

After that, we'll hear from Michelle Van Handel who is with the National Center for HIV, AIDS Viral Hepatitis, STD and TB Prevention. Michelle is the Acting Associate Director for Program and Performance Improvement Office. After those two presentations, we'll pause for a moment to answer questions since we know that both of those centers have funded all of the participants with the work plans that they're working on and we'll allow folks to answer those questions. Then if they're not funded by the Centers for Epidemiology and Laboratory Services, CSELSCSELS, they can drop off of that call.

During that time, we'll have a brief pause to allow folks to drop off the call if they need to. Then we'll move on to the demonstration for the CSELSCSELS portion of the call that'll be presented by Anjelica Young who's an ORISE fellow within the Division of Health Informatics and Surveillance here at CSELSCSELS and Sebastian Romano who's an evaluation specialist health

scientist within that same division and center. With that, I'll turn it over to Wendy who will actually start our demonstration.

Wendy Heirendt: Thank you so much Michele. As Michele said, my name is Wendy Heirendt. I'm going to walk you through the first portion of one section, the NCIPC quarterly performance progress and monitoring report form that's in REDCap.

Our intention today for this demonstration is essentially just to familiarize all of you with this form so that you can understand how to fill it out and the logic that's built into it. Let's go ahead and get started. When you go into REDCap and you select the NCIPC quarterly performance progress and monitoring report, this is the screen that will come up first.

These performance measures as you may know when you submitted your original work plan we had an evaluation team that went through and looked at all of those. They pulled about 700 performance measures from those work plans. About 300 of them were the actual performance measures so we went ahead and grouped them into different categories.

We ended up with 7 categories and within those 7 categories we were able to identify 24 suggested performance measures. Jurisdictions, you can look at those and you can report on some of those performance measures that we've suggested, some of them, all of them or a blend of those performance measures with your locally identified performance measures.

The seven buckets are categories that we've identified. I'll just walk you through those quickly: to improve data, improve prescribing behaviors, the infrastructure step and capacity, training, communications, guidelines and protocols and linkages to care. As I said there are 24 performance measures,

22 of them are outcome measures and there's 2 process measures that I'll also demonstrate if you choose those how to fill that out.

For the locally identified performance measures, we'll walk through one of those just so you're familiar with that process. I'm going to start to scroll down. As I'm scrolling down just a reminder that during quarter 1 this 1st quarter, you'll have to navigate through each of the performance measures and enter those in.

Once you've entered them all in then you won't have to re-enter them for Quarter, 2, 3 and 4. If you do need to make a change to any of the performance measures you'll have to contact your science officer so that we can open the form up so that you can make that edit as needed. The 1st part, you'll see the in the center of your screen there's a sub-account number. That sub-account number will be pre-populated and that is unique to your jurisdiction.

You don't need to worry about that. Once you get into the overview section here again you'll see some information about the performance measures where we actually list them all out for your easy reference. As you scroll down actually scrolling down through those seven categories as it's related to performance measures you'll get to the section again for reference on how to fill out the form.

This is the section that we're actually going to walk through today. We're going to enter performance measure 1. You can see the purple band there that says performance measure 1, the drop down list. If you click on the arrow, you're going to see again, seven categories of performance measures. Let's say we're going to start with improved data. You click on that particular

category and then you'll see down below where you select a particular performance measure.

From here you'll see that there are the suggested measures, performance measures that we've listed out and then the local measures. That's the one we'll come back to. Let's just select A. Now you'll see the form has changed. We selected the number of lab samples screened for opioids. The value type, we have two choices here, number or percent. We're going to choose the number.

Next, you're going to enter your baseline value. Again, that's going to be a whole number so you'd enter – we're going to start with 0. There we go. We'll start with 0, enter your baseline and then enter our target. Where's our target? We're just going to use 500. The next box is for the performance measure description. We want to give you plenty of opportunity to share additional information that's unique to that particular performance measure that you're entering.

Here you can just enter the additional information. If you're using – if there's any particular specific population that you're going to be posting on you can enter that information here or anything that you see that'd be applicable. Next you select your domain that that performance measure relates to and you can select all that apply. Then we're going to the…on my screen it's a yellow or golden stand where we talk about the value achieved by quarter. This is where we're starting to get into our progress reports.

Remember for Quarter 1 our baseline was 0. For Quarter 1 how many lab samples did we get? We're just going to say 25. You enter that and then scroll down. Then you're going to give your quarterly status update. How well are you doing on that performance measure? You can see here the 25 has

already pre-populated here. You have more of a snapshot. We're going to say we have our five selections.

We can say not started, on track, off track, it's complete or it's discontinued. We achieved 25 so we're on track so we just click on that radio button. That's all you have to do for your progress there. If you have some supporting documents that you want to share with us you can upload your document here and set it on your screen that you'll be able to upload that document.

The next slot is recipient comments. These are your comments. What went well in working with this performance? What challenges did you have or is any other relevant notice that you'd like to include? You can see here these are the notes for Quarter 1. You'll enter it there. In subsequent reporting quarters, you'll see that you'll have a box for Quarter 2, Quarter 3 and Quarter 4.

The next box that you see is something that we call the Brag box. This is a great opportunity for you to share anything that's going great, even if it's not part of the larger performance measure. You can talk about having a great meeting or a fabulous outcome that you didn't anticipate, anything that you want to brag to us about. This is your opportunity to type in your great success here.

And then the next box, the last box you see is does NCIPC have any comments. This box is for us. If we have no comments we'll just click no. If we do have comments then this box will pop up. We'll say no comments for now. That's how you enter a performance measure that's already been pre-populated.

Now imagine there are two process measures so improving; prescribing behaviors is one where you'll have different choices and the linkages to care. Let's take a look at linkage to care so we can follow that one through. As you'll see linkage to care here is all of our performance measures and then you'll see letter H, status of PDMP linkages.

If we click on that one…there we go. As you scroll down to again the gold band, you'll see that it looks a little bit different here. Here is where you can give the status of the PDMP, status of your PDMP linkages. When you do that you'll select one of these three that best describe what your status is for that. Working from the right side you'll see the PDMP isn't linked to any large healthcare system.

If that's your state starting point you'd click that radio button. To show progress we look at the middle one where it says PDMP is linked to EHR and operational in at least one large healthcare system. You click it there. You can see there's a progression and what we're hoping for is that at the end of this project period that your PDMP will be linked to more than one healthcare system. You'd check that radio button or whatever that status is.

When you do that you don't have to fill out this next section. You just skip down because with that one it's a process measure. It's a little bit different. The rest of the form is still the same. We've already talked about that where you enter your recipient comments. Again, you have your brag box if there's anything else that you wanted to address.

I'll give you one more example here. Let's go to performance measure number 3. We're going to click on there and we're going to – let's…we'll do linkage to care again. We're going to do a local measure. We wait for just a second for that, the boxes to pop up. This is where we're going to look at

what's your local measure that falls into that category. We're going to enter in – this is an open free text box. You're going to say linkage to care.

We're going to say the number of counties…oops -- I had caps on -- make linkages for example. For demonstration purposes, I want to see how that works so the value type, as you can see we use a number. Then we're going to enter our baseline value and then our target value.

Under units, we have to type in here the number of counties that make linkages so the units are going to be counties. You just type it into the box there. Then what's being measured, we'll just say the number of -… I'm sorry linkages- that make linkages. You type that in and you'll see right down here you have the text of your performance measures.

You're looking at the – your target is to have 12 counties that make the link. That's how you'll enter your locally identified measures. The box here of performance measure description, that's where you can enter your numerator and denominator if you're using percentages instead of numbers. Again, you'd still go through it like the domain and then the number that you're achieving per quarter.

This box here -- this question have you edited or updated the previously reported value for a quarter -- this is something you'll fill out in Quarter 2, 3 and 4. If you had originally entered a 2 in Quarter 1 and you have additional data and now you know that number is a 4 you'd enter it in there and then check the box for yes. Then indicate to us that you did make a change in Quarter 1 so that we're aware that those numbers have in fact changed.

Again, you go through your quarterly status updates, upload it in documents, share any additional comments, and then any brag box and any additional

comments. Then once you get to the end please remember to save the form. That way you don't lose your data and you can save and exit out of that form.

Just one other note that I had skipped over -- let me just scroll up here -- there's a little button, a little radio button, and it has H in it. That is where you can view your data history. This is where you can look to see if you've had any changes for that particular field. As you can see -- and that is why I didn't make any changes -- there are no changes noted here. That is a nice way to know if you've made any changes and to in fact track those changes.

That is how you work on the NCIPC forms. We're going to hold questions until later but for now I'm going to turn it over to Michelle so she can talk to you about her forms.

Michelle Van Handel: Good afternoon everyone. My name is Michelle Van Handel. Thanks so much for the introduction. I'm the Project Lead for the NCHHSTP project, the jurisdiction level vulnerability assessments, for risk for opioid overdose, HIV and viral hepatitis. I'll refer to this as the vulnerability assessment project because our center name is long enough. I don't need the full project name.

Again for taking time to join us this demonstration this afternoon. The NCHHSTP quarterly performance form is very similar to NCIPC quarterly performance form. I'll just briefly reshow the form, and highlight some of the key differences between the forms and then go through a few examples to familiarize you with NCHHSTP forms and then you'll leave knowing exactly how to fill out this form or ask your science officer.

About the performance measures, let me just scroll down. I'll come back up to the top in just a second. I just want to pull it up on the screen. I think it's

just long enough but it doesn't fit on the screen. We developed ten suggested performance measures with at least one performance measure for the four major activity areas of the vulnerability assessment projects. For major activity areas 1, 2 and 3, we focused on key process outcomes or deliverables.

For major activity area 4 we focused on feasible implementation outcomes that aligned with key prevention interventions and activities proposed by multiple states. You can see the performance measures listed in the overview section of the quarterly performance progress and monitoring report on the screen here. Performance measures 1, 2 and 4 are really the three most core to the vulnerability assessment project and the key deliverable.

Many jurisdictions noted outreach events to the communities identified as vulnerable from their assessment. We included that outcome with performance measure 3. For performance measures 5 through 10 we focused on measures that'd need minimal new data collection, were feasible to monitor in this timeframe and were specific to the communities identified as vulnerable from your jurisdiction's vulnerability assessment.

Our purpose is communities as written in these performance measures generally means county since that's the most common geographic area that'll be used in the vulnerability assessment. For some it means zip code or census tract. Please discuss with your science officer to identify which performance measures align well with your activities. They'll also be able to provide you with more information on the rationale for these performance measures.

Similar to NCIPC, when selecting performance measures to report on for the duration on this project you can choose to report on some or all the suggestive performance measures. Only the performance measures that you identify locally or a blend of both of suggested and locally identified performance

measures Also notice that the performance measures are either measured as a dichromatic yes/no, a numeric count or a numeric percent.

I mention that because once I'm done with the form you'll see that there's a box available for you to enter the value of your performance measure. You can either select the yes/no, number or percent option. Keep this in mind once you review the actual form.

I'm just going to go back up to the top and highlight a couple items. During Quarter 1 you'll navigate to the NCHHSTP quarterly performance progress and monitoring form and action on the performance measures you plan to report on throughout the course of this project period, including the associated information which again I'll demonstrate in just a second.

After you complete the form for Quarter 1 the selected performance measure, value type, baseline value, target value and performance measure description will be placed in read-only mode. We understand that plans may change particularly related to major activity area 4 since we anticipate that this activity would start during the second half of the project period for most jurisdictions.

After you complete the form for Quarter 1, you'll be able to make revisions or additions by consulting your NCHHSTP science officer to add, remove or edit your performance measures. Again, in order to change or update your performance measures or any section for a selected performance measure consult your science officer. For Quarters 1, 2, 3 and 4, you'll be updating the actual outcome or value.

Just real quickly, you might notice that we are not using Chrome today but I don't think we'll have any problems. For speed purposes, we do recommend

using Google Chrome when navigating in REDCap for a slightly faster performance. As then as always, we reserve the right to make changes to these performance measures and report it as you can see, although we'll do this at a minimum.

Moving on I just wanted to point out there's the seven top numbers. This will be pre-populated. You won't need to enter any other information. Similar to ours, to NCIPC we have information about the performance measures and then there's very similar information on how to fill out the form.

I'll demonstrate three performance measures and we'll start off with hopefully with the most straight forward. The straightforward - the jurisdiction wide vulnerability assessment. Let me just highlight that a little longer, identifying areas of high risk for opioid overdoses and infections associated with non-sterile injection drug use is completed. It's a yes/no. We're going to go and select the yes/no value.

Our baseline value, ideally we'll have – be able to put in yes or no. For today we're going to put in the numeric 0 if you're a coder. And then, you might be planning to do two assessments, one for opioid overdoses and one for infectious diseases from unsterile injection drug use. Here we'd want to note two vulnerability assessments. This is the real test. Can you type onscreen?

We'll just make that note and then for Quarter 1 we don't have it done yet. Maybe the next quarter we completed one. By Quarter 3 we completed the other. We could leave this one blank for Quarter 4. Again, if you have any changes on the following quarter you can select yes and it'll allow you to indicate which value has changed.

I know everyone's on track so we'll go ahead and enter that. Then by Quarter 3 we'll have this completed and it'll be completed for Quarter 4. This is where you can go, this document upload area is where you can upload either your map or any other document that'd be related to this indicator. Similarly feel free to enter in information from your recipient's comments on what's going really well, any challenges you had or any other relevant notes for Quarter 1. Then Quarter 2, 3 and 4.

When we review the quarterly performance monitoring report each quarter we may add in some comments. That's when you'll see it here. If not, there'll be no box. For performance measure 2, I'm going to use performance measure number 3, percentage of vulnerable community with at least one outreach event to disseminate findings.

This seems a little questionable. You might be wondering what's an outreach event. Here's your opportunity to select this performance measure but make it your own. We'll go through an example of how you could make that adjustment. You might not have done any for your baseline value but you plan to reach at least 75% of your vulnerable community by the end of the project period.

Just a note, if you're entering a percent just enter the actual value. Don't include the percent sign and don't write it as proportion. Here you might want to specify perhaps you're trying to provide…technical assistance to local health department… and anticipate 12 vulnerable counties. You will all be …better typers than me. And plan to provide TA to 8. There for your denominator is number of vulnerable counties and your numerator is number of vulnerable counties to which states health departments provided TA to local... Acronyms are great. Then we'll go ahead and you can again fill out Quarter 1, 2, 3 and 4.

Since this is the percentage, we want to add in perhaps by quarter – might not get started on this until Quarter 3. You might reach half, maybe four of them and then you'll reach all eight of them by Quarter 4. We'll skip this part but if you're not startedit yet, on track, off track and complete are incomplete on all your status updates for each quarter.

I want to do one example of locally selected measures. Again performance measure, go down locally, identify performance measure, very similar to NCIPC, might select number of HIV testing sites in three priority vulnerable census track for you, for those of you during smaller areas. This is a number. It might not be any or it might be unknown.

If it is unknown right now we can't enter in non-numeric values. You could leave it blank and just leave unknown. We want to make sure – we at least want to know the census track by the end of the project period. You can say baseline unknown, will identify once vulnerable census tracks are identified in or identify baseline.

There might be a little bit more information you want to add in there. Then again you'd complete Quarter 1 through 4 values just as you had earlier, Quarter 1 through 4 quarterly status updates just as you had earlier and then if you have any information you want to upload. Again, feel free to add in all relevant comments that you may want to. Once you're done you want to save and exit form or save as you go as a best practice to not lose your work which I didn't. I think this gets us to our first question and answer time period. I'll hand it back over to Michelle Hoover to help facilitate.

Michelle Hoover: Everyone I'm going to ask Hang to come back over and move it so that we can see the chat, Kara if you can please open up the lines for folks to be able

to ask questions over the phone and we'll also make it available so that folks can ask questions in the chat section as well.

Coordinator: For those participating on the phone, if you'd like to ask a question please press star 1, unmute your phone and record your name clearly. I do need your name in order to introduce your question. If you choose to withdraw your question please press star 2. Again, to ask a question, please press star 1. It'll take a few moments for the questions to come through. Please stand by.

Pause

Michelle Hoover: Give people a chance to digest. That was wonderful information from our presenters. I will reiterate what Michelle Van Handel mentioned at the end. We chose during this presentation because of the way in which it reloads the entire form when you save; to not save during the presentation to save time. We definitely recommend saving and saving on a regular basis just to help maintain that data that you have already enter into the system.

Coordinator: You have questions coming in, one moment please. Our first question comes from Andrea Lombard. Your line is open.

Andrea Lombard: Michelle this is for you. Thank you for outlining the use of this tool, kind of lost me a little bit with the last example or the last couple. You were just giving us local health departments as a potential denominator county as a potential denominator. Is that correct? And then, when we got to testing sites you were just giving that as an example within the census track. They were mixing apples and oranges but you were just throwing them out as possible examples, correct?

Michelle Van Handel: Correct. Most states have proposed to do their analysis at the county levels. That's a pretty common unit for our surveillance data. It's often the

unit that data is available. However, a few states or the District of Columbia don't have that option. They'll be doing their analysis at a smaller unit level. I was providing just examples. Most will be county but there will be some states who may choose to do a smaller geographic area such as census track, for example, in cities or zip codes.

Andrea Lombard: Okay thank you.

Michelle Van Handel: Then the testing site was just an example of something that someone made, selected the local measure level.

Coordinator: The next question comes from Linda Scott. Your line is open.

Linda Scott: Hello. My question, when you put – if CDC were to put comments in that one area based on our responses is there any kind of notification comes to the state program or is that something we just need to go in and check?

Wendy Heirendt: Hi Linda, this is Wendy. Based on what I view – looked at the form there's no notification. You'd have to go in and see that. If it were a really pertinent comment I'm sure your science officer and project officers would reach out to you. This would be more of a comment that could be used for your next monthly call or for you to note or to take note of when you do your next quarterly progress report.

Linda Scott: Thank you.

Coordinator: Again as a reminder if you'd like to ask a question please press star 1 on your phone and record your name, one moment.

Pause

Michelle Hoover: A reminder as well that you do have the ability to type in questions into the chat box if you'd like.

Coordinator: The next question comes from Marissa. Your line is open.

Marissa: Hello, just a question. Thank you so much for showing us this. Is there going – are there going to be any paper based templates that are distributed? The reason I ask is that the person – I'm the person that will put it into REDCap but I'm not the person that'll be compiling the data so just curious if there'd be any templates.

Wendy Heirendt: Again this is Wendy. We're going to try to share the screen again so you can see. We will not distribute any paper-based templates. It is an electronic system but if you can see the screen that's being shared at the very top it says an action that says download PDF of instruments. If you click that arrow, you have the option of creating a PDF. The first one is - it's just a blank form and it shows all the options.

The second one is if you want to say the particular section with your data in it then you'd click the second one. The third and the fourth options, I'd be careful with those because that'll create a PDF that's really big, very big. That'd take a ton to create but that'd show all the forms that are in the REDCap system that you have access to. I would recommend either the first or the second one so that if you needed to share that paper based document with others in your office.

Michelle Hoover: Note that the PDF form prints out slightly differently, than what you see on the screen. The PDF is a little bit more difficult to navigate and collect information on. Depending on how your state wants to handle things you can

request additional people to be added into REDCap to be able to enter the information and just leave it in a yellow state or a non-complete state that may help with data collection purposes and then having someone else actually review it all or add additional information before it's marked complete.

Coordinator: The next question comes from Jennifer Faust. Your line is open.

Jennifer Faust: Hello. I actually put my questions into the chat area. I don't know if you all aren't looking at it but do you want me to repeat the question or…?

Michelle Hoover: If you could repeat it, it seems that the question and answer section really isn't showing the chat at the moment for whatever reason. I'm going to try to put something in there so someone can ask a Chat question.

Jennifer Faust: Okay. I don't have REDCap open. Is there a way that you can display it again just because I can't remember what a certain thing is called, so I can explained it.

Michelle Hoover: Sure.

Jennifer Faust: Yes, the NCIPC Quarterly Performance, I think that's the form that I would fill out. My Project is listed under it in NCIPC. So, my questions related to this form. So, I'm in the Virginia Department of Health and we have something like 15 or so projects that are falling underneath the funds that we've gotten from this grant. And we were told that each of the PM's, Project Managers, for each of the projects are to create one of these reports. So, I need a way to be able to indicate my project name, but I could not for the life of me figure out how to do that when I want to open up the form.

Wendy Heirendt: Hi Jennifer, this is Wendy. For the purpose of REDCap, this would actually reflect your entire jurisdictions progress. So, in REDCap - we won't see your 15 individual projects for NCIPC because that will be your data that's an aggregated. Your numbers will reflect, you know, the entire jurisdictions work within those categories and as you're working on those particular performance measures. You do have the option to create those locally identified measures. So, if each of your 15 projects have different performance measures that will result in a whole lot of performance measures and we are encouraging you to keep the number to about 8 to 12 roughly.

And I'm saying that number because we want to reduce the burden that falls on you and that way you can really choose those meaningful measures to report on each quarter. This system will allow you to enter a maximum of 50 performance measures but again, that's a lot of measures to be reporting on for each quarter. If that's not an option that's going to work for you, then let's get with - we'll get with you offline with your Science Officer and make sure that we are able to collect all that good progress that you will be making.

Jennifer Faust: Okay. Yes, because this has not been discussed at all amongst all of us. It's a major misunderstanding I guess because we all individually thought we had to report and that's why when we tried to do it, it was very confusing. And there hasn't been any performance measures identified that I'm aware. of it so I don't even know what we're supposed to be reporting on in terms of those measures so we definitely have to have some kind of internal meeting but I'm not the one running the entire thing. It's Sherry - I'm not sure if she's on the line. I can't think of her last name right at the moment. Yes, we're going to have to figure this out. Thank you.

Wendy Heirendt: Okay.

Michelle Hoover: And I would suggest reaching out to your Science Officer and helping work through that process with you if possible. That may help. We have a question that's come in through chat and it's also for NCIPC. For folks using local measures, is it correct that almost fit into one of the seven categories?

Wendy Heirendt: Yes. So, the short answer is yes. What we've done is identified those seven categories and then within those - most of the work that you're doing really should fall within those categories because when we looked at all the work plans and all the performance measure that you originally submitted in your original work plan, we were able to fit everything into those seven buckets of categories. So, I'm not sure who was asking that question or where you're from but I know you've got a great Science Officer that you're working with. We can work with you so if you have a locally identified measure, we can help identify which of those seven is most appropriate so that it will accurately reflect your work.

Michelle Hoover: So, another question that has come in is, how do we get the performance measure set up in the form or in the work plan? And it could be that Centers are doing it slightly differently between them but I'll allow both Wendy and Michelle to answer this question.

Wendy Heirendt: All right, this is Wendy. I'll take the first crack at that. How do we get the performance measures set up? That's where - it's now for quarter one, that's where you would go in and - if you could scroll down just a little bit to the first performance measures. This is where you're going to select this performance measures. So, if you look at the screen - we'll look at number one, improve data. And so, we have five performance measures under there and these are the suggested measures. So, if the work you're doing would fit then it would help support, you know, the number of opioid involved death,

then that's the one that you would select and then enter that into performance measure one as we demonstrated.

If none of these measures fit your work, that's when you would use those local measures. But again, as the previous person asked, it would fall within those seven categories.

Michelle Van Handel: And this is Michelle Van Handel with NCHHSTP, would you mind scrolling up so you can see the slide. So, if you're a state that has funding from all three Centers -- sorry I'm going to use the acronyms but -- CSELSCSELS, NCIPC and NCHHSTP -- there are forms for all three, CSELS is coming up and you see NCIPC's and NCHHSTP's so this is where you'll be selecting the final performance measures. When you submitted your work plans or if you've made revisions to your work plan, there was a section for performance measures but you don't need to worry about updating that section from here forward. This is the form we'll use for selecting your final performance measures or any changes you make later on and then reporting on those quarterly. So, it's by funding stream for these forms.

Wendy Heirendt: And this is Wendy. We had a follow up question on - one of the jurisdictions had like Virginia, 19 projects and the question was, does the recommended 8 to 12 measures apply to those - or is the 8 to 12 across all three funding streams? And the answer is no. That only applies to the NCIP and to those performance measures that we've identified on that form.

Michelle Hoover: And for NCHHSTP, we're asking for ideally one performance measure per major activity area but up to ten but really just to keep the burden on you all as low as possible for the reporting requirements.

Michelle Hoover: So, there was a request to repeat the last question and the question, in a nutshell was, for jurisdictions and states that have multiple projects and among those projects may have multiple performance measures, is that across all three funding streams? And the answer is no. That each Center that is funding the information, the Injury Center and folks in , STD and in CSELS -- each have different performance measures that have been identified and states can select among those performance measures which one's match with their activities, and which ones they may want to include as a specific jurisdictional measure in addition to that.

Coordinator: We do have a question on the phone. The next question is from Jennifer. Your line is open. Jennifer Alvisurez, your line is open.

Sarah Doitch: Hi there. Sorry this is Sarah Doitch from Washington State Department of Health. I am with Jennifer. So, my question is about the vulnerability assessment. We are looking at major activity four and the performance measures number 7 and number 8 talk about new cases of HIV and Hepatitis B. Are you looking at just us being able to report on our surveillance or are you looking at sort of the impact because the activity is initiating implementation? Like do you want to see changes over time because this seems like a pretty short time period if that's what you're looking for.

Michelle Hoover: Yes, I'm so glad you asked that question because I didn't put it in my speaking notes. No, we're not anticipating that there will be a drastic increase but it's really to set us up so that you are identifying those communities -- so let's say county in this case -- and able to use surveillance data to monitor whether there are increases in HIV and HCB over time so it's just setting you up for the long run. We definitely don't anticipate you, you know, doubling your HCB diagnoses in the last quarter. So, thank you.

(Crosstalk)

Michelle Hoover: Oh, sorry.

Sarah Doitch: I was just going to say thank you but maybe it would be helpful if you put that in writing just so we can see that?

Michelle Hoover: Yes. You can definitely reach out to your Science Officer. I think I have a call with you coming up but we can definitely try to get something out to clarify that.

Sarah Doitch: Thank you.

Michelle Hoover: All right, and thanks so much everyone for your questions. What we'll do now, if you have additional questions please feel free to reach out to your Science Officer and then respective Centers or your DSLR Project Officer and they will make sure that we connect you up with the proper people to address those issues that occur. At this point in time, we are going to switch gears and move over to those 23 states that are funded through the CSELS portion of the cooperative agreement. You are more than welcome to stay on the line but we wanted to give folks the opportunity to drop off if they needed to because we know time is very valuable to all of us. So, we'll pause for just a moment here and then we will restart momentarily.

Pause

All right, hopefully this has given those who are sticking on the line are the ones who would like to stick around and listen to the section that is focused on CSELS and the activities to build state capacity to enhance syndromic surveillance. At this time, I will turn it over to Anjelica Young and Sebastian

Romano who will provide you with a broad overview and walk you through the demonstration of the CSELS forms.

Sebastian Romano: Hi everyone, this is Sebastian Romano. I will be providing a quick overview before Anjelica jumps into the nitty gritty of the REDCap forms that we have developed. So, for the CSELS portion of this funding announcement, we have developed four major strategy areas and in these four strategy areas as we've gone over with each of your work plans, provided a total of 14 suggested measures. Not all measures are applicable to every jurisdiction, as it's based on the activities within your individual work plans. And, measures were developed based on an assessment of all the activities that were entered into all of the 23 jurisdictional work plans.

So, that is kind of the background of where we started from. We've then gone through that precursor of that Excel spreadsheet that we've gone through with each of our jurisdictions at which had information including your activities, any activity updates and measures that will be included as part of your performance measurement plan. And now, these pieces of information have been entered - or will be entered into the REDCap system in the forms that you are about to see and that Anjelica will show you.

So, with that I will pass it over to her and she will lead you through it.

Anjelica Young: All right, thank you Sebastian. So, we will go ahead and jump into the first form for CSELS and this is the biosurveillance monthly activities monitoring form. So, as you can see here, we have the title and scrolling down we have best practices. These are the same throughout all three Centers. So, going down you can see an overview of the strategies for CSELS and these should align with the Excel spreadsheet that you have been working with. And, here we have just a quick note on how to complete you form at the bottom.

So, this form is broken into four sections, one section for each of these four CSELS strategies, strategies one through four. For strategy one, there is only one activity to report on and this is if you have designated an Opioid Surveillance Coordinator. For strategy two through four, the jurisdiction has the ability to report on up to six different activities. These should have been finalized within the last few weeks with your Science Officer. So, going forward each jurisdiction will be reporting monthly on the status of their activities.

So, here we have strategy number one, identify or designate an Opioid Syndromic Surveillance Coordinator. And as you can see here activity one is already populated and in a "read only" format. This is how all of your activities in the form will be seen. However, as of today, the form is not fully complete on this side but once you receive it and you're working with your Science Officer, all activities will be greyed out with specific activities for each jurisdiction.

So, right below the activity box you have the activity status. In here, you will select if it's not started, on schedule, off schedule, completed, planned but discontinued or it's a new activity. Below that, you have the activity start date followed by the target end date. And, once you populate these you will see here that it has conveniently populated a space to note the number of days until the activity ends. So, for activity one we have a yes/no question. Has a Coordinator been designated or identified? And that could be more than one person. And then we ask to provide the name and the major duties and responsibilities for that position.

So, below there we have the monthly activity updates and this is where the majority of the updates from the jurisdiction will be posted each month. So,

we ask for the date of the activity update here and the activity update provided by the jurisdiction. Scrolling down - oh, and as you populate one box - so for example this is for October, another box will pop down and this will be for the following month. Scrolling down you can see the monthly CDC notes. So, that is for your Science Officer here at CSELS to populate on their calls with you - for any notes that they take throughout the call.

All right and then you see a section for a document upload and this might include information on the person -- the hiring that you've done for an Opioid Coordinator, their roles and responsibilities. And there is a document upload under each strategy.

So, moving on to strategy number two, increase the number of ED facilities submitting data to the BioSense platform especially in HIDTA County. We have provided a few bullet points below each strategy to assist and act as a prompt for the jurisdictions as they're filling out their monthly update. So, that will make more sense as we go down but you can see activity one here. It's not yet in read only format but it will be when you are accessing it.

Again, same as above, activity status followed by a start and end date. And then the monthly activity updates. So, as mentioned we highly recommend that you utilize the prompts below each strategy to help answer and input your data and information into these activity update boxes. And I did not mention this earlier but if you have your Excel spreadsheet work plan near you and accessible, you can pull that up and that might be helpful to visualize what your form will look like while we review the REDCap. And if you choose to do that, if you wanted to go to your strategy two, we are at activity one and just visualize what that might be.

So, going down you can see here is for September. Another box pops down, October was able to be filled in. Now, going down again, November. And now there is another box for December. And below that, again, are the monthly CDC notes that would be taken by your Science Officer.

And then we go into activity two. So, recognizing that some jurisdictions for some strategies may only have one activity while others may have up to six different activities. So, if you do not have an activity two, feel free to just scroll down to the next strategy. And a reminder to the jurisdictions to utilize the prompts that are provided because all of the information that is entered into the monthly updates will then populate the Quarterly Reporting form. So, the more specific you, are the better information we will be able to collect.

So, continuing down you can see activity two will follow in the same way with a box to enter the activity followed by the status update, the activity start and end data and then again, the jurisdiction monthly activity update. Scrolling down we have CDC' notes. And as you can see here these are the different spaces for activities.

So, strategy three, again, there are these prompts to help inform your monthly updates. The activity one box, activity status, start date, end date, monthly updates -- and the form will continue in this way throughout. So, just scrolling down here you can see that I've populated it so that when we go to the next form it'll be easier to understand.

I'm going to continue down to strategy four. And again, same format with the prompt followed by your activities and the same format as above. So, scrolling down to the bottom I would like to point out here at the top there is a place to save and exit and also a place to either save and stay so you can go to the next form or go to the next record.

And scrolling down to the bottom, we ask that all jurisdictions, once you have inputted your information that you simply click the Complete button so that will let your Science Officer know that you have completed that form. And each month this will be reset, so each month after inputting your information you should click Completed.

Michele Hoover: And just a reminder that we know that some people may need to validate the information with others so it's okay to use yellow or unverified in the process until you're ready to actually submit that form and then mark it as Complete.

Anjelica Young: Okay, and moving onto the next form. This will be the CSELS Quarterly Performance Progress and Monitoring Report, Part 1. So, as the other Centers have pointed out the subaccount number will be populated by CDC so no need to worry about that.

So, there will be two quarterly reporting forms listed on REDCap for CSELSCSELS. The first we will go over here and it focuses on the information on performance progress and monitoring activities. This form will be prepopulated from the monthly activity update -- that form that we just went over. And which should alleviate most of the burden for the jurisdictions for this form. The second Quarterly Report we will go over last and this will focus on selecting the CSELSCSELS core outcome measures that CDC recommended for each jurisdiction based on their work plan.

So, getting into this form you can see we have quarter one followed by strategy one. And then activity one -- which will be prepopulated for each jurisdiction and the previous form will then prepopulate here followed by the monthly activity update that you, the jurisdictions, provided. Under there you have a space for recipient comments followed by CDC comments.

Then we have strategy two, same format with the activity followed by your monthly update. And you can see activity two and the monthly updates for activity two. And it will follow throughout the form in this way. Again, you'll have recipient comments so for the jurisdiction and then CDC comments.

Strategy three, same format -- activity one followed by monthly updates. So, if it's not clear, these are - this is the date that you entered the monthly update followed by what the monthly update was.

So, scrolling down it continues in the same manner for strategy four as well. And this form will include all four quarters. So, this again will prepopulate and here's quarter two. So, there's no information unless it's for the month that would populate quarters two yet. So, scrolling down to the bottom. Again, we ask that once you've completed this form simply press Complete and that is that form.

And the final form we have is the CSELS Quarterly Performance Progress and Monitoring Report, Part 2. Okay, thank you. So, here you can see we have the core measures and you should be familiar with these. You should have reviewed these with the Science Officers on your most recent call. And yes - so then we have a column for each quarter. You can see here that I've already prepopulated this with information that I've put in but we'll go over how you will do that.

So, you cannot actually enter information or numbers into this table. So, as I scroll down you will see where the information will be lifted. So, I'm going to change this from a 7 to a 5. Clicking out of the box when I scroll up for quarter one. You can see now that it says, 5 and so we have the numerator, the

denominator, your list of data information use and sharing actions and the list of public health actions and decisions made.

So, for quarter one here is where you would input your information. The numerator, denominator and again same information. There is a space for recipients to make comments and then a place for a CDC comments. So, scrolling down you can populate quarter two when it is time. And the form will continue like this in the same way. So, you have quarter three which I have not populated in any way which is why it is also blank in the table, and also quarter four. So, I'll scroll up to let everyone look at that table one more time.

And we ask at the bottom of this form, you also simply press Complete. That way your Science Officer will know that you've completed that form for the quarter. And with that, I will pass it back to Michelle Hoover.

Michelle Hoover: All right, thank you Anjelica. A couple quick notes, as you notice with the both NCIPC-- and pardon me as I do use the acronyms too -- and NCHHSTP, they have both processed an outcome measures. With CSELS we also have process and outcome measures but those process measures are what we're collecting through those Activity Reports that you're doing. So, that is the reason why our Quarterly Reports have two different sections. The first one is process and will help us evaluate that measurement and where you're making activities that way. And the Progress Report and Performance Measures number two, is where we're actually capturing your outcome measures. So, just to clarify that.

We do have a - I'll open up the phone line for Kara so that we're able to go there but let me answer or ask a few of these questions here. When we complete activity strategies for end of October, are we required to report for

October and November? And the answer to that is, as you see with the quarterly reporting whether you place all of that information in the November box or in October and November, you'll want to make sure that information is captured so that it can be carried over into that quarterly report. So, it's not - it would be nice if they're in the timeframe in which you populated them but it's really about making sure that information is captured for folks to be able to provide that report information.

The next question is, by what date each month is the report due? And so, the monitoring tool portion of it, that is due based on the timing of your monthly calls that you have with your Science Officer. Our goal is that the Science Officer will be able to review the information ahead of time, perhaps share the screen -- the REDCap tool -- through Skype or some other vehicle to be able to walk you through that report and be able to discuss that with you along the way. So, that will really become the agenda for your monthly discussions with the Science Officer. So, it will vary by state and by Science Officer and depending on the time of year you may have calls that are very close, back to back, just because of the timing of the holidays and everything else falls.

Since the Quarterly Reports are going to be cleared, can we print what was reported to have a record? Of course. The report as - if you scroll back up for a moment. As we mentioned a moment ago, up at the top there is a download of PDF as an instrument. So, if you go to the second one with this data entry form with saved data that will give you an output of what it is. At the same time, the History button that is located next to each area - so if you look on the History and click on that, it will show you -- and it won't on this one but -- if you had made changes there that will show an always maintain that information over time.

Are there other questions on the phone?

Coordinator: As a reminder, if you would like to ask a question, please press star 1 and record your name. One moment. We show no questions on the phone at this time. PAUSE

We do have a question, one moment please. Our question comes from Rosa, your line is open.

Rosa Ergas: Hi. This is Rosa Ergas from Massachusetts. I just - I wanted to clarify when this REDCap Reporting system is going to be available? We were told that we weren't quite sure this would be used for our next status update or what the timing might be.

Michelle Hoover: Yes, we are having - we are in the process of making very minor refinements to actually make it more user-friendly for everyone to be able to use. The vast majority of them have been built into the system already. The next step is the Science Officer's will actually take the information that has been agreed to in the discussions from the Excel spreadsheet and populate that and then we will let folks know exactly when they will be able to start using it for their calls so our themselves. Our hope and goal is that we can get that done very soon. Probably within the next week or two so that everyone will have access to that. Our major goal is to make sure that we have everything up and ready and available so that you're able to use them and be able to complete and submit all of your reports before the December 14 deadline.

Rosa Ergas: Great, thank you.

Michelle Hoover: For the quarterly report. So, I'm sorry I can't give you an exact deadline but hopefully that gives you an idea of roughly when you'll be using it.

Rosa Ergas: Yes, that's helpful, thank you.

Michelle Hoover: Other questions?

Coordinator: There are no questions on the phone at this time.

Michelle Hoover: For the - I have one question that came in by chat. So, for the Project Officer call, we should be using the spreadsheet. Well it depends upon where you're at in your discussions with your Project Officers. So, many of the Science Officers in this case, the folks who are reaching out and speaking with you have been on phone calls to kind of discuss what was in that Excel spreadsheet that included both the Science Officer and the members of our evaluation team that are helping them with us -- Sebastian Romano.

So, depending on the timing of that, if your call is scheduled for November before we're able to finalize this report than you would be using your Excel spreadsheet to help talk through that information and provide additional information. Hopefully, you will have that call completed shortly and have an agreed upon kind of finalized performance measures and activities and then in that case that information will be shown in the REDCap and you will use REDCap for the reporting.

Pause

So, the next question that comes in is, can you repeat the due date for the Monthly Report? And there is no official due date for the Monthly Monitoring Report. Those are usually - that's' a discussion that you will have with your Science Officer as to when the information is to be submitted so that they can have that discussion with you during the call. We would of course hope as most of any other sort of monitoring process, we're hoping that those will be

finalized by the end of each month but we also know that there are times when it may go into a second month.

So, for example during this past fall folks weren't able to complete their October calls until the first week of November. We certainly understand that and we're very flexible about what's happening with that. Our whole goal with the monthly monitoring is really to help have discussions with you, guide the discussions that will help populate the Quarterly Report as well as to identify opportunities for technical assistance or help you overcome any barriers or challenges. So, there isn't a set due date for the Monthly Report.

The Quarterly Reports are due by December 14 for this quarter. And our available on -- and I'm sorry I didn't bring my spreadsheet with me -- on the spreadsheet that was shared with you by the DSLR Project Officers for each quarter. So, roughly at the end of the third month and in this case it's at the end of November is the end of the third month, roughly two weeks after that end of that month the final Quarterly Report is due for that quarter.

Pause

I have a question here that says, this reporting and coordinating getting information very difficult without having concrete dates. Let me clarify, the states themselves will have concrete dates that are provided to them by their Science Officers for when this information is due. It's just that not all calls take place on the exact same time so it's impossible for us to sit here and go through the 23 different potential dates that may be available for those monthly monitoring calls. And the most important ones are the Quarterly Reports and making sure that you have the information within those Quarterly Reports -- which are then populated by your monthly calls. So, the idea is to eliminate the burden of trying to input information over the last three months

that you're trying to recall at the end of the quarter versus keeping kind of an ongoing dialogue and monitoring process along the way.

We have about five more minutes and we have time for maybe one more question or so.

Pause

If there are no additional questions, we will bring this to a close. Thank you once again for joining us this afternoon and we look forward to working with all of you. Once again, if you have any questions, feel free to reach out to your individual work plan Science Officers through the Centers that are funded through those work plans or your DSLR Project Officer and they will help direct you to the right place for that information. So, thank you very much for joining us this afternoon. Have a good evening.

Coordinator: That does complete today's conference. Thank you for your time. Please connect. Speakers, please allow a moment of silence and standby for your post conference.

END