



BC Centre for Disease Control
An agency of the Provincial Health Services Authority

Documenting Geography for CD Investigations in Panorama

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1.0 Purpose

The purpose of this document is to assist Panorama users in documenting Communicable Disease reports so that they:

1. Conform to the “Guidelines for Geographic Attribution of CD cases for Surveillance Reporting Purposes: who reports what?”.
2. Support sharing of records between BC and Yukon when required for case management or federal reporting purposes

This document discusses how to document geography for CD investigations in Panorama. Geographic variables in Panorama may represent different things, including where the client lives, where the client received services, who is reporting the case, or who is providing the services.

Geographic assignment for surveillance purposes, or ‘who counts a CD case’, is determined by the client’s residential address. However, clients sometimes have multiple addresses (e.g. in the case of commuters, temporary workers) or unknown addresses making geographic assignment difficult. This document provides guidance with respect to how specific fields in Panorama - Classification Authority, Client Home Address at Time of Initial Investigation, Client Health Region, Responsible Organization, and Responsible Investigator - should be documented in various scenarios.

Appropriate documentation in Panorama is important and supports the above two objectives, however communication between BC and Yukon health care providers outside of Panorama (e.g. fax, phone) is often necessary to ensure that providers are aware when records are transferred or are appropriately notified when public health actions are required (e.g. contact prophylaxis) (see Appendix A for list of contact numbers).

Note: All communication to and from BC should be coordinated by Yukon Communicable Disease Control (YCDC).

2.0 General Principles

- In general, CD cases are reported by the jurisdiction corresponding to the client’s residential address (permanent residence) at the time of the investigation. This applies even if the individual was traveling within or outside the jurisdiction when they became infected, and if their workplace address or mailing address is in an area different from their residential address. Geographic attribution is not done on the basis of a person’s health insurance status, existence of a BC PHN or Yukon HCIP or First Nations status card as such identification can be retained even though a person has moved.
- Visitors are excluded from a jurisdiction’s surveillance counts. This includes travelers visiting temporarily for holiday, business or family reasons (e.g. summer vacation, summer camp, adventure hiking/ fishing, one-time business trip). Case details should be notified back to the case’s jurisdiction of residence for reporting purposes.
- Apart from being used to document the Organizations involved in the care and follow-up of a client, the Responsible Organization field in Panorama is also used to determine who can view the record. In order to support client-centric care, all organizations involved in the

public health management of cases should be documented as Responsible Organizations. Operationally, this supports sharing of care by enabling users from all documented Responsible Organizations to access the investigation record. A Responsible Organization may be added to a client’s chart – even if no service was provided by that organization – in order to allow that organization to be able to view and access the investigation record. This will occur in situations involving Yukon and BC where a permanent resident of one jurisdiction is provided care by the other. In these situations, both jurisdictions must be added as Responsible Organizations regardless of where care is provided. Including both jurisdictions at time of record creation also supports the transfer of the investigation when the client returns home.

- Yukon contracts BCCDC TB control for consulting services to Yukon around the care and management of TB. As such all Yukon TB investigations and BC TB investigations that involve a Yukon resident must be viewable by both jurisdictions. Consultations might occur at any time, thus parties have agreed that *both jurisdictions will be listed as Responsible Organizations on these TB investigation records*. This applies to all TB services provided – active cases, LTBI, skin tests, etc.

3.0 Definition of Geographic Variables in Panorama

Authority

Represents the jurisdiction that defined the case definition used to classify the investigation (e.g. confirmed, probable). Authority may be Provincial, Territorial, manual (system mandatory) or National. If Yukon case definitions are being applied to the case or contact then ‘Territorial’ is selected; if the BC case definitions are being applied to the case or contact, then ‘Provincial’ is selected. The Authority is the jurisdiction in which the case is counted for provincial/territorial and PHAC reporting purposes. No investigation should remain set to ‘manual’; the value for ‘Authority’ must be updated from manual to either ‘Territorial’ or ‘Provincial’ depending on the circumstances.

Client Home Address at Time of Initial Investigation

This is the address associated with the investigation at the time the case was diagnosed. On occasion, a client’s temporary address rather than permanent address should be documented as the “**Client Home Address at Time of Initial Investigation**”. Please refer to the specific use cases in the tables below. This variable is found on the Investigation screens in Panorama, not in demographics.

Client Health Region

This is the Health Region (Branch) associated with the Client's primary home address. This is the location that the client claims is their permanent place of residence. Health region policy states that Health Region is only changed when the client permanently moves to a new region. If the client moves permanently, the existing address is end dated and the new address documented, and the Client Health Region changed.

Responsible Organization

The Organization(s) providing care and follow-up for a client investigation and/or responsible for reporting and surveillance. The Responsible Organization value for each party will be entered at the "lowest" level for each organization to match the local service delivery location (e.g. branch).

Note: A Responsible Organization may be added to a client's chart – even if no service was provided by that organization – in order to allow that organization to be able to view and access the investigation record for surveillance and reporting purposes. This will occur in situations involving Yukon and BC where a permanent resident of one jurisdiction is provided care by the other. In these situations, both jurisdictions must be added as Responsible Organizations regardless of where care is provided.

TB investigations are to include YCDC and BC CDC TB Services as Responsible Organizations for all Yukon TB investigations and BC TB investigations that involve a Yukon resident. This supports the agreement between Yukon and BC TB Control for consultation services.

When selecting a Responsible Organization, it is also mandatory to select a Responsible Organization Workgroup; please select the most appropriate choice from the list of values provided in Panorama.

Investigator Organization

Each investigation must have one Primary Investigator organization which may include assignment to a specific person. This is the investigator responsible for care and follow-up. An investigation may have several secondary investigators and/or 'other' investigator organizations; these should include only those doing active work with the case and associated Public Health follow up. In some circumstances the jurisdiction reporting the investigation nationally may be different from the primary investigator.

When adding an Investigator Organization, it is also mandatory to select an Investigator Workgroup; please select the most appropriate choice from the list of values provided in Panorama.

4.0 Guidelines for Documenting Geography in CD Investigations

4.1 Documenting Geography in CD Investigations where Permanent Address is Well Defined

Clear-cut cases where the permanent residence of the client is known should be documented as follows:

	Authority	“Client home Address at time of initial investigation”	Client Health Region (at the time of the investigation)	Responsible Organization	Investigator Organization 1 – Primary 2 – Secondary O – other	Who reports nationally?
1. Yukon is providing public health services for Yukon residents	Territorial	Yukon	Yukon	- YCDC HSDA - BCCDC TB Control if TB related.	1-YCDC HSDA 2- BCCDC TB Control, if providing consultation	Yukon
2. BC is providing any public health service for BC residents	Provincial	BC	BC	- BC Branch - BCCDC TB Control (if TB related)	1-BC Branch or Health Authority 2- BCCDC TB Control, if providing consultation	BC

	Authority	“Client home Address at time of initial investigation”	Client Health Region (at the time of the investigation)	Responsible Organization	Investigator Organization 1 – Primary 2 – Secondary O – other	Who reports nationally?
3. BC is providing public health services for Yukon residents	Territorial	Yukon	Yukon	- BC Branch - YCDC HSDA - BCCDC TB Control (if TB related)	1- BC Branch or Health Authority 2- BCCDC TB Control, if providing consultation 2-YCDC HSDA, if assisting	Yukon
4. Yukon is providing public health services to BC resident (E.g. Atlin)	Provincial	BC	BC^ ^exception: Lower Post, BC is under Yukon JORG structure.	BCCDC ¹ and YCDC HSDA	1-YCDC HSDA	BC

¹ Case/contact notification to occur subsequently from BCCDC to the appropriate BC Health Authority (HA); the HA will update the record to add themselves as a Responsible Organization

4.2 Documenting Geography in CD Investigations where a Client has Multiple Addresses

There may be circumstances where geographic determination for reporting purposes is not clear cut. The following describe common scenarios encountered and the jurisdiction to which such cases should be assigned.

4.2.1 Visitors and Commuters

Visitor: This includes travelers visiting temporarily for holiday, business or family reasons (e.g. summer vacation, summer camp, adventure hiking/ fishing, one-time business trip).

Case details should be notified back to the case's jurisdiction of residence (e.g. Health Region) for reporting purposes and should not be included in the counts of the jurisdiction that is being visited.

Commuter:

This is an individual with multiple addresses (e.g. a permanent address in one jurisdiction and temporary address(es) in another jurisdiction where they reside for the work requirement). The commuter has not established a permanent residency in the location where they are working but has a regular requirement to be in that jurisdiction.

Case details should be notified back to the case's jurisdiction of residence (e.g. Health Region) for reporting purposes and should not be included in the counts of the jurisdiction that is being commuted to.

In general, Address at Time of Case and Health Region should be documented based on their permanent address, not the address they are visiting or where they are working.

	Authority	“Client home Address at time of initial investigation”	Client Health Region (at the time of the investigation)	Responsible Organization	Investigator Organization 1 – Primary 2 – Secondary O – other	Who reports nationally?
5. Visitor/Commuter: Yukon resident travelling in BC temporarily for holiday, business or family reasons Assume: BC diagnosed the Case and is providing service	Territorial	Yukon ²	Yukon	- BC Branch - YCDC HSDA - BCCDC TB Control (if TB related)	1- BC Branch or Health Authority 2- BCCDC TB Control, if providing consultation 2-YCDC HSDA, if services provided	Yukon
6. Visitor/Commuter: BC resident travelling in Yukon temporarily for holiday, business or family reasons Assume: Yukon diagnosed the case and providing services	Provincial	BC ³	BC	BCCDC ¹ and YCDC HSDA	1-YCDC HSDA 2- BC Branch or HA, if services provided 2- BCCDC TB Control, if providing consultation	BC

² Please note: the temporary BC address should be documented for case management purposes through addition of a new Client Address with Address Type = temporary (in the Personal Information Screen)

³ Please note: the temporary Yukon address should be documented for case management purposes through addition of a new Client Address with Address Type = temporary (in the Personal Information Screen)

	Authority	“Client home Address at time of initial investigation”	Client Health Region (at the time of the investigation)	Responsible Organization	Investigator Organization 1 – Primary 2 – Secondary O – other	Who reports nationally?
7. Visitor/Commuter: Out of province/territory client provided service in Yukon (e.g. Client from Alberta) Assume: Yukon diagnosed the Case and is providing service	Territorial	Appropriate jurisdiction outside Yukon and BC	Out of Yukon	YCDC HSDA	1-YCDC HSDA 2- BCCDC TB Control, if providing consultation	Other jurisdiction
8. Visitor/Commuter: Out of province/territory client provided service in BC (e.g. from Alberta) Assume: BC diagnosed the case and is providing service	Provincial	Appropriate jurisdiction outside Yukon and BC	Out of BC	- BC Branch - BCCDC TB Control (if TB related)	1- BC Branch or Health Authority 2- BCCDC TB Control, if providing consultation	Other jurisdiction

4.2.2 Temporary workers, snowbirds, students attending educational institutions

These are individuals with multiple addresses (e.g. a permanent address in one jurisdiction and a temporary address where they reside while working, visiting or attending school). These individuals have relocated for an extended period of time and have established residency in the temporary location.

These cases should be reported by the jurisdiction where they have established temporary residence at the time of diagnosis. Case details should be notified back to the case’s jurisdiction of permanent residence. It should be clear in this notification that the jurisdiction of temporary residence intends to report the case nationally.

In Panorama, temporary workers, snowbirds, students attending educational institutions should have their Address at Time of Case documented as their temporary address however Client Health Region should reflect their permanent address.

	Authority	“Client home Address at time of initial investigation”	Client Health Region (at the time of the investigation)	Responsible Organization	Investigator Organization 1 – Primary 2 – Secondary O – other	Who reports nationally?
9. Temporary workers, snowbirds or students from Yukon with temporary residence in BC and BC providing services	Provincial	BC (Use temporary address)	Yukon	- BC Branch - YCDC HSDA - BCCDC TB Control (if TB related)	1- BC Branch or Health Authority 2- BCCDC TB Control, if providing consultation	BC
10. Temporary workers, snowbirds or students from BC with temporary residence in Yukon and Yukon providing services	Territorial	Yukon (Use temporary address)	BC	BCCDC ¹ and YCDC HSDA	1-YCDC HSDA 2- BCCDC TB Control, if providing consultation	Yukon

	Authority	“Client home Address at time of initial investigation”	Client Health Region (at the time of the investigation)	Responsible Organization	Investigator Organization 1 – Primary 2 – Secondary O – other	Who reports nationally?
11. Temporary workers, snowbirds, students: Out of province/territory client provided service in Yukon (e.g. Client from Alberta) Assume: Yukon diagnosed the Case and is providing service	Territorial	Yukon (Use temporary address)	Out of Yukon	YCDC HSDA	1-YCDC HSDA 2- BCCDC TB Control, if providing consultation	Yukon
12. Temporary workers, snowbirds, students: Out of province/territory client provided service in BC (e.g. from Alberta) Assume: BC diagnosed the Case and is providing service	Provincial	BC (Use temporary address)	Out of BC	- BC Branch - BCCDC TB Control (if TB related)	1- BC Branch or Health Authority 2- BCCDC TB Control, if providing consultation	BC

4.2.3 Staff/residents of institutional facilities

This refers to those individuals that reside in an institution (e.g. correctional facilities, nursing homes, hospitals or other institutions). These individuals may have two addresses (e.g. one where they resided before entering the institution, and one associated with the institution).

These cases should be reported by the jurisdiction where the individual lives and sleeps most of the time. Case details should be notified back to the case’s jurisdiction of permanent residence if this is not the same as where the individual lives and sleeps most of the time. It should be clear in this notification that the jurisdiction where the individual lives and sleeps most of the time intends to report the case nationally.

In Panorama, record Address at Time of Case as the address where the individual lives and sleeps most of the time and record Health Region as their permanent address.

	Authority	“Client home Address at time of initial investigation”	Client Health Region (at the time of the investigation)	Responsible Organization	Investigator Organization 1 – Primary 2 – Secondary O – other	Who reports nationally?
13. Yukon staff/residents living/sleeping most of the time in BC residential facilities	Provincial	BC (Use address of residential facility)	Yukon	- BC Branch - YCDC HSDA - BCCDC TB Control (if TB related)	1- BC Branch or Health Authority 2- BCCDC TB Control, if providing consultation	BC
14. BC staff/residents living/sleeping most of the time in Yukon residential facilities	Territorial	Yukon (Use address of residential facility)	BC	BCCDC ¹ and YCDC HSDA	1-YCDC HSDA 2- BCCDC TB Control, if providing consultation	Yukon

	Authority	“Client home Address at time of initial investigation”	Client Health Region (at the time of the investigation)	Responsible Organization	Investigator Organization 1 – Primary 2 – Secondary O – other	Who reports nationally?
15. staff/residents from any jurisdiction other than Yukon and BC living/sleeping most of the time in Yukon residential facilities	Territorial	Yukon (Use address of residential facility)	Out of Yukon	YCDC HSDA	1-YCDC HSDA 2- BCCDC TB Control, if providing consultation	Yukon
16. staff/residents of any jurisdiction other than Yukon and BC living/sleeping most of the time in BC residential facilities	Provincial	BC (Use address of residential facility)	Out of BC	- BC Branch - BCCDC TB Control (if TB related)	1- BC Branch or Health Authority 2- BCCDC TB Control, if providing consultation	BC

4.2.4 Newborns

Occasionally, babies born to a Yukon mother in a BC hospital may contract an RCD and vice versa. Notifiable diseases in newborn babies who have not yet been discharged following delivery should be reported by the jurisdiction of the mother’s usual residence. On the Panorama investigation, record Address at Time of Case and Health Region as the mother’s permanent address. In cases of adoption, these should be set to the jurisdiction of the adoptive parents’ residence.

	Authority	“Client home Address at time of initial investigation”	Client Health Region (at the time of the investigation)	Responsible Organization	Investigator Organization 1 – Primary 2 – Secondary O – other	Who reports nationally?
17. Notifiable disease in baby born to Yukon mother in BC hospital	Territorial	Mother’s Yukon address	Yukon	BC Branch and YCDC HSDA	1- BC Branch or Health Authority 2-YCDC HSDA, if and when services provided 2- BCCDC TB Control, if providing consultation	Yukon
18. Notifiable disease in baby born to BC mother in Yukon hospital	Provincial	Mother’s BC address	BC	BCCDC ¹ and YCDC HSDA	1-YCDC HSDA 2- BC Branch or HA, if and when services provided 2- BCCDC TB Control, if providing consultation	BC

4.3 Documenting Geography in CD Investigations where Address is Unknown

When specific address is unknown or the client has no fixed address, case is attributed to the jurisdiction of the diagnosing provider. In Panorama, document Address at Time of Case and Health Region as jurisdiction of the diagnosing provider.

	Authority	“Client home Address at time of initial investigation”	Client Health Region (at the time of the investigation)	Responsible Organization	Investigator Organization 1 – Primary 2 – Secondary O – other	Who reports nationally?
19. Address unknown, but diagnosed in BC	Provincial	^	Unknown City - BC	- BC Branch - BCCDC TB Control (if TB related)	1- BC Branch or Health Authority 2- BCCDC TB Control, if providing consultation	BC
20. Address unknown, but diagnosed in Yukon	Territorial	^	– Whitehorse Branch	YCDC HSDA	1-YCDC HSDA 2- BCCDC TB Control, if providing consultation	Yukon

^ Refer to No Fixed Address Data Standard

5.0 Documenting Geography in Contact Investigations

Inter-jurisdictional communication between health care providers outside of Panorama (e.g. fax, phone) is often necessary to ensure that providers are aware when contact records are transferred or when public health actions are required (e.g. contact prophylaxis). When communication between BC and Yukon is required, this should involve BCCDC and YCDC (see appendix A for list of contact numbers).

	Authority	“Client home Address at time of initial investigation”	Client Health Region (at the time of the investigation)	Responsible Organization	Investigator Organization 1 – Primary 2 – Secondary 0 – other	Who reports nationally?
21. Contact Tracing: Primary case in Yukon, Contact lives in BC, (this is the Contact’s investigation)	on creation defaults to manual; once contact investigation transferred, BC investigator should update it to Provincial	BC	BC	BCCDC ¹ and YCDC HSDA: Yukon identified the contact and BC or Yukon will conduct the follow-up.	1-YCDC HSDA* *on creation defaults to YCDC HSDA; primary investigator must be changed to BC Branch once contact investigation transferred for follow-up	N/A
22. Contact Tracing - Primary case in BC, Contact lives in Yukon, (this is the Contact’s investigation)	on creation defaults to manual; once contact investigation transferred, YCDC investigator should update it to Territorial	Yukon	Yukon	BC Branch and YCDC HSDA: BC identified the contact and Yukon or BC will conduct the follow-up.	1- BC Branch* * on creation defaults to BC HA; primary investigator must be changed to YCDC once contact investigation transferred for follow-up	N/A

Appendix A: Contact Information for BC Centre for Disease Control (BCCDC) and Yukon Communicable Disease Control

BRITISH COLUMBIA

STI only – See communicable disease below

Clinical Prevention Services
BC Centre for Disease Control
655 West 12th Avenue
Vancouver, BC V5Z 4R4
Tel: 604-707-2422
Fax: 604-707-5604

All other CDs

Communicable Disease Prevention and Control Services
Epidemiology Services
Tel: 604-707-2510
Fax: 604-707-2516

YUKON

All CDs

Yukon Communicable Disease Control (YCDC)
Health & Social Services, Government of Yukon
Ph: 867 667 8323
Fx: 867 667 8349