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

Minimum Dataset Working Group

Update to CD Policy
October 20, 2015

L. MacDougall for the Minimum Dataset Working Group

Working Group Objectives

- Propose a development and approval process for establishing the minimum dataset collected for each disease / disease grouping
- Develop a tool for documenting the disease-specific minimum dataset
- Define data elements common to all diseases
- Define a schedule for review of all the existing provincial case report forms

Provincial Case Report Form Development and Approval Process

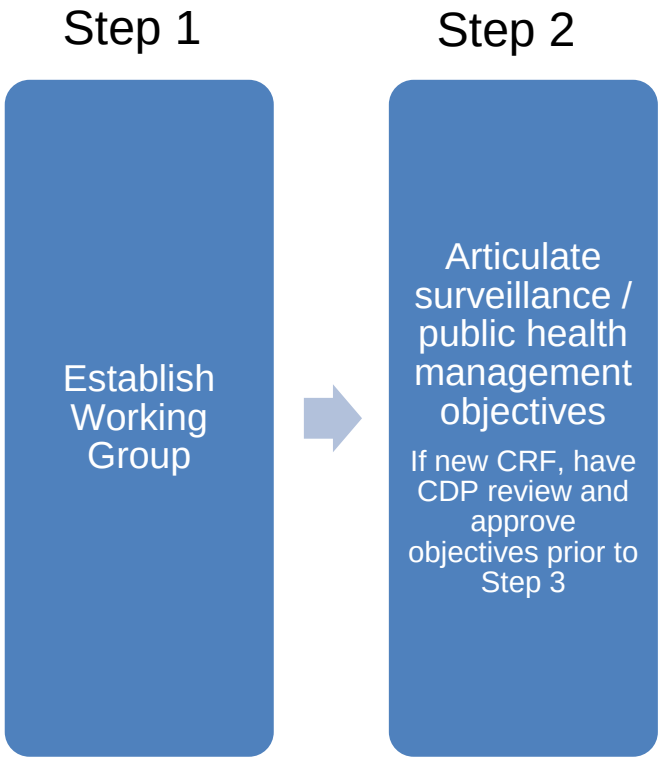
Step 1

Establish Working Group

Working Group

- Recommend that existing groups be leveraged or augmented where possible (e.g. enteric policy WG, STIBBI)
- Minimum composition:
  - 1 representative from each Health Authority, including FNHA
  - 1 representative from BCCDC
  - Among the group, at least one member should be a Medical Health Officer, epidemiologist, public health nurse and/or EHO.
  - End users of the provincial case report forms should be consulted in the process, if different from the above (e.g. GPs).
- Optional:
  - Groups may seek consultation from BCPHMRL medical microbiologists on laboratory variables, as needed, and from MOH staff, where appropriate.

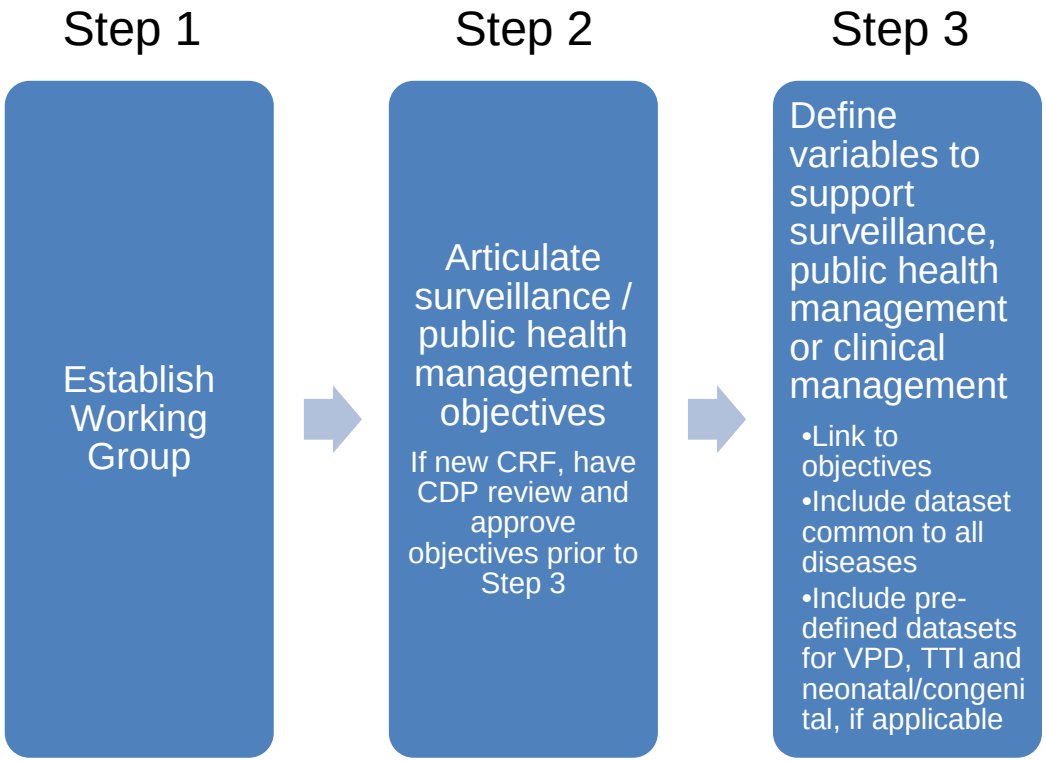
Provincial Case Report Form Development and Approval Process



Establish Objectives

- Disease-specific objectives may be related to surveillance, public health management, or clinical management
- New CRFs, or those with major changes to surveillance, must have the objectives reviewed and approved by CD Policy prior to defining variables for collection

Provincial Case Report Form Development and Approval Process



Define Variables

- To be included in a CRF, a variable must support at least one of:
  - Surveillance
  - Public Health Management
  - Clinical Management
- Each variable is tied explicitly to a main purpose (above) and to the specific objective it supports

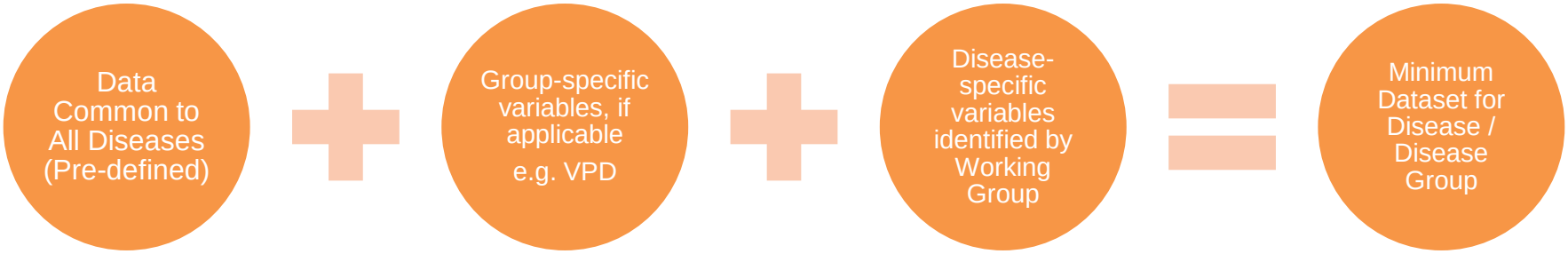
Pre-defined Variable Sets

Working groups given pre-defined dataset upon which they will layer any group or disease-specific data requirements

- Data Common to All Diseases (complete)
- Group-specific data requirements
  - To be developed by WGs, as appropriate. For example:
    - Data Common to VPDs
    - Data Common to TTIs
    - Data Common to neonatal/congenital infections
  - Will be approved by CD Policy and made available for other disease-specific working groups

Minimum Dataset Definitions

Diseases with Provincial CRFs



Diseases without Provincial CRFs

Data Common to All Diseases

Last Name	Causative Agent
First Name	Classification
Date of Birth	Report Date (received)
Gender	Test Name
Health Care Number (PHN)	Specimen
Health Region	Collection Date
City	Result / Interpreted Result
Postal Code	Onset date or closest proxy
Disease	Aboriginal Data Standard

Recommendations

- Evidence review be conducted by the working group to identify specific risk factors to be collected on the form
- General quality review be conducted of the variables collected on existing CRFs

Assessment Tool

Assessment Tool\Provincial CD Case Report Form Assessment Tool 2015 09 10.xlsx

Sharing Data

The tool specifically captures which data is required to be shared at the provincial level

Data element collected	Rationale for collection	Relates to which Objective from Step 2	Clinical Management^	Public Health Management	*Data needed provincially?**	Surveillance	*Data needed provincially?**
Last Name			☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐
			☐	☐	☐	☐	☐

^ Assumption that data collected regionally for clinical management is never needed provincially

* Data needed at the provincial level is to be shared using Panorama

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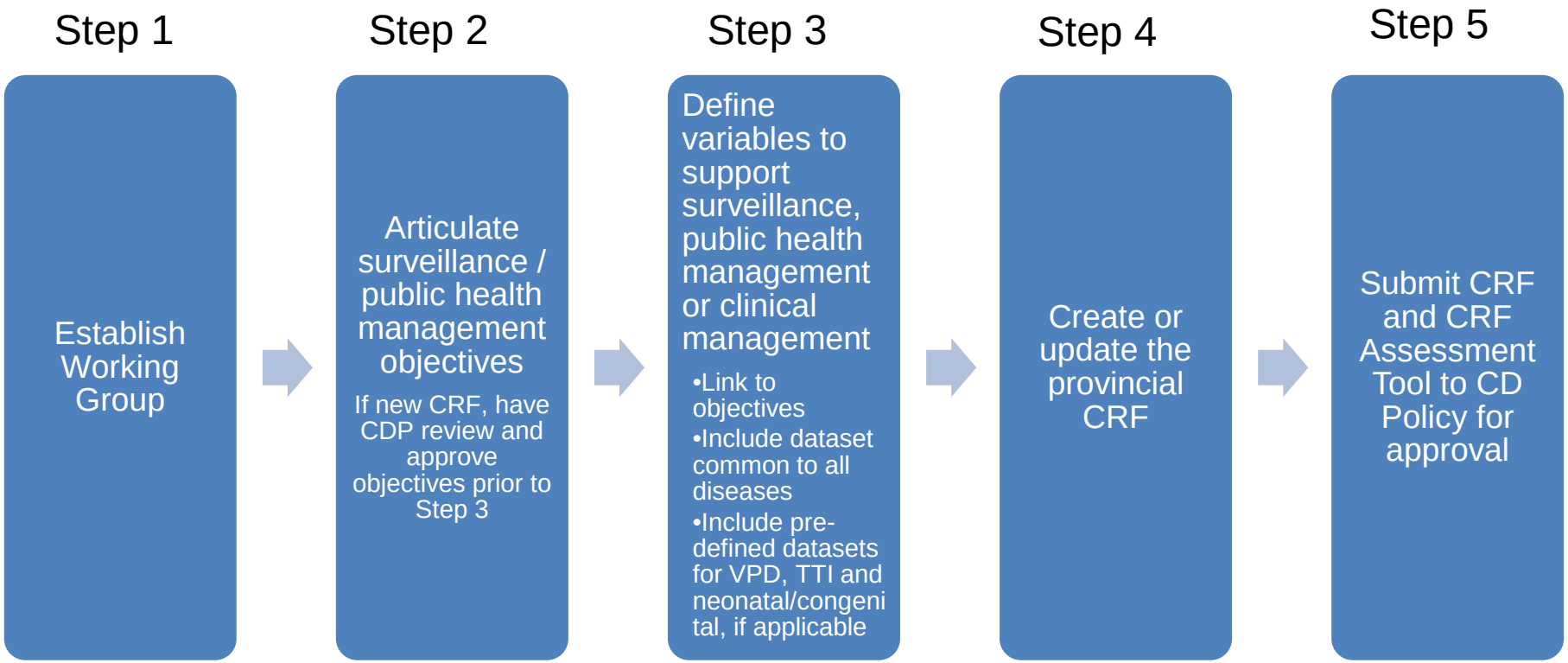
Provincial Case Report Form Development and Approval Process



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Decision and Next Steps

- Recommend CD Policy acceptance of process and tool
- Recommend including the package in the new Surveillance chapter of the CD manual
  - Process
  - Assessment form
  - Core dataset common to all diseases
  - Group-specific datasets, as developed
- Recommend CD Policy confirm that aboriginal data standards (currently included in the ‘data common to all diseases’) are to be collected for all RCDs
- Working groups to use process to review existing CRFs over the next 1.5 years

Schedule of Provincial CRF review

Year	Jan	Feb	Mar	Apr	May	June	Jul	Aug	Sept	Oct	Nov	Dec
2015		Hep B/C		TB		SOS			Diphtheria HIB Measles, Mumps, Rubella Meningo, invasive Pneumo, invasive iGAS Strep, group B Tetanus	CJD	AIDS HIV	
2016	Enterics Shellfish-related illness		Pertussis	Chlamydia Syphillis Gonnorhea Lymphogranuloma venereum								Vectorborne Zoonotic

Calendar months represent the anticipated start date of the Minimum Dataset review process for each disease or disease grouping

Not yet scheduled:
SARI
Hepatitis A

Working Group Members

Michelle Murti, FHA	Jason Wong, BCCDC
Sherry Baidwan, FHA	Bonnie Henry, MOH
Monika Naus, BCCDC	Reka Gustafson, VCH
Laura MacDougall, BCCDC	Margot Smythe, VCH
Eleni Galanis, BCCDC	Dee Hoyano, VIHA