

Population and Public Health

An occasional newsletter to help inform WRHA PPH Staff

Healthy Parenting and Early Childhood Development Database (HPECDD) Next Steps

Overview

The HPECDD will replace a large number of manual systems. It will provide more current information for surveillance, client care and effective management of HPECDD services. Administrative staff and PHNs will both look up and enter data in the database. The database will replace the HPECDD Monthly Summary, most reporting forms to Healthy Child Manitoba (HCM) and assignment and record tracking systems in community areas, but will not replace paper health records.

The Database will be used by all WRHA PPH program staff working with HPECDD clients including:

- Expectant women and families
- Infants discharged from hospital care that require Public Health services
- Families or women who have experienced a birth
- Families or guardians of newborns or preschool children



A discussion at the Promoting Health Equity PPH and Community Area Workshop – Jan 14, 2014. Stay tuned for updates and activity.

[See Article on iPHIS Audit](#)

The database will also be used by central administrative staff to transfer referrals for the four situations noted above and for clients that have received services in the Winnipeg Health Region to other RHAs and provinces for Public Health services.

PPH program staff using the database include: Administrative staff, Families First Home Visitors, Public Health Nurses, Clinical Nurse Specialists, Team Managers and Epidemiology and Surveillance staff.

Population and Public Health receive all referrals from birthing hospitals and midwives that require follow-up by Public Health staff. We are also the central clearing house for all referrals for infants cared for in Winnipeg hospitals that require public health follow up. We share referrals that are logged in the database with other RHAs, Provinces, and other jurisdictions so that they can arrange appropriate health care services.

Manitoba eHealth will generate a quarterly abstract of database content for Healthy Child Manitoba. This sharing of data is required by the Healthy Child Manitoba Act. Management reports will be shared with Community Area teams every three months.

Implementation Time Lines

The database will be implemented in all Community Areas, Prenatal Connections, Healthy Sexuality and Harm Reduction and Central Intake. Full implementation of the HPECDD is projected for June 9, 2014. However that timeline is yet to be confirmed by EHealth.

A training schedule will be arranged. The anticipated start date for training is mid-May. Training is anticipated to take three weeks in order to ensure all PPH staff is reached. Administrative staff will be among the first people to be trained. Training is projected to take about half a day.

In order to ensure that information is in the database for clients who are receiving PPH services, starting June 2 data will be entered for all clients who are expected to be 'open' on June 9 when the HPECDD is fully implemented. PPH staff is asked to close files for any clients we do not expect to serve beyond that date. It will be helpful to clean up caseloads and discharge files of those who will not be active on June 9. Administrative staff will be asked to complete back-entry of those expected to be active on June 9 during the week of June 2.

What has been completed to get the HPECDD ready for implementation?

- The database was developed through the efforts of a working group of community area and centralized services staff.
- A number of enhancements to the original database were requested and developed.
- Database functionality has been tested and corrected where necessary.
- A data entry process was developed.
- A user manual was developed.
- Training scenarios were developed.
- HPECDD management reports were developed through the efforts of a working group of community area and centralized services staff.
- A Privacy Impact Assessment was completed.

What still needs to be completed?

- Complete the training plan
- A pilot data extract for the purposes of sending raw data directly to Healthy Child Manitoba. Those involved in the pilot include Central Intake staff.
- Desktops readied to use the HPECDD.
- Programming of HPECDD management reports.
- Final approval of the 'go-live' by the eHealth.

HPECD Database Changes

Front Line Staff Benefits

- Track referrals through system
- Find existing health records
- Easily determine if case open or closed
- Find client care providers
- Manage own and team caseload
- Avoid duplicate health records / Provide service based on pre-existing info

Front Line Staff Change

- Entry into database by provider, fewer paper systems used to transcribe info into database / decrease data loss and transcription errors)

WRHA System Benefits

- Stop non-PHIA compliant tracking systems in CAs and Central Intake
- Assist in managing provider work
- Assist in referral management
- Generate funder-required reports
- Improve program monitoring
- Real time reporting
- Support Baby Friendly data requirements
- Support health equity initiatives
- Improve reporting to community and partners

Front Line Staff Challenge

- Increased data entry (duplicate FF Screening risk factors and Parent Survey scores)

iPHIS Privacy Audit 2012-2013

In Nov 2013 the Population and Public Health (PPH) program implemented a privacy audit of iPHIS, the current application used by a variety of staff in centralized services and community areas for the purposes of communicable disease management.

Privacy audits of information systems have identified breaches and opportunities for improvement. Learning opportunities included

not looking at your own or your family's health records.

The audit was completed to fulfil a requirement in the Personal Health Information Act regulation, which requires that electronic information systems are audited every three years.

The PPH Surveillance Team was able to generate a report listing two random occasions of access per current iPHIS user for the period

between November 1, 2012 and October 31, 2013. The audit encompassed all current users, including eHealth's Service Desk and PPH Analyst staff.

The access details in the report were then separated by office location and/or manager. Each User's access details were itemized on a separate sheet so the details could be shared with that person without the need to share extraneous personal health information with other users. These Audit Reports and a Feedback Form were sent by e-mail to the manager. Managers were asked to review the access details with each User and complete the Feedback Form to verify that each occasion of access was necessary for the purpose of providing health care.

The audit details recorded each access occasion as either 'viewcl' (read only), or 'curcl' (read/write access) It was assumed that if people were using the 'curcl' (read/write) view of a client's record, they were more likely to have a valid reason for access than 'viewcl'.

During the review of audit details it became apparent that many access occasions were 'phantom' records. Further investigation revealed that all name suggestions produced in a wild card search were recorded as a 'view'. This was then taken into account when interpreting results.

The audit was completed with the help of managers and staff.

Contributions Welcome

If you want to share a story or let others know about an activity or initiative with which you have been involved, please contact [Horst Backé](#). Contributions of regional interest are welcome for future newsletters.