NSSP UPDATE

National Syndromic Surveillance Program — BioSense Platform

Welcome to NSSP Update

NSSP Update is published monthly by the National Syndromic Surveillance Program (NSSP) and brings you the latest news about the BioSense Platform and Community of Practice.

If a colleague forwarded this issue to you, we encourage you to subscribe to receive future issues.

NSSP Looks Ahead

In 2017, the NSSP Team will bring new sites onboard the BioSense Platform to improve data representativeness—not only to get a better *national* picture of health, but also to expand situational awareness *regionally*. NSSP Program Manager Michael A. Coletta held a New Site Onboarding webinar with nine sites planning to join the NSSP community to use the BioSense Platform. NSSP has notified the sites that will begin onboarding in April and will list these sites in the May issue of *NSSP Update*.

Data Dictionary (Data Flow Requirements) Available in NSSP Resource Center

The latest version (v28) of the Data Dictionary (Data Flow Requirements) has been added to the NSSP Resource Center. *No password is needed.* The document provides detailed information about data elements stored in NSSP data tables. Essentially, this is a robust data dictionary with additional metadata. Since first published, the descriptions for some data elements have been updated for clarity. This document adds to the suite of materials available through "one-stop shopping" on the NSSP Resource Center.

NSSP Transitions Legacy Data

We previously reported that a third of NSSP site data would be transitioned by early to mid-May. That's still our target. However, the timing will likely be the end of May. Now that we have transitioned some sites' legacy data completely, we are modifying the timeline to allow for the complexity and volume of data. As of mid-March, legacy data from 4 sites had been processed, and another 12 sites were reviewing their data in staging.
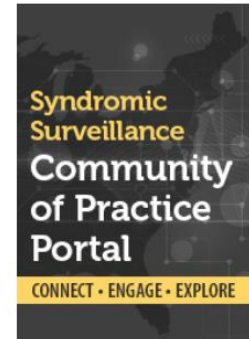
We will continue to work closely with each site to process data, uphold data quality standards, and maintain program efficiency while meeting site specifications. We appreciate your patience as we work through this process. We will continue to update the community on our progress and shifting of timelines until the transition is complete. Please contact us if you have specific questions about your site.

Community Members Join Portal

The Syndromic Surveillance Community of Practice (SyS CoP) Portal is a convenient way to see what your colleagues are doing to integrate syndromic surveillance into daily practice. When you visit the Portal, check out the right-hand column titled State and Local Resources. Peruse this column for ideas and ways your organization can contribute to the Portal.

For example, the *Oregon ESSENCE Syndromic Hazard Report* combines information for readers who have varying knowledge about SyS, which is challenging to do in a single report. Oregon's report includes definitions, queries, seasonal health effects, and data. Washington State Department of Health connects users of its Rapid Health Information Network with a community of practice that shares developments in health informatics and facilitates collaboration and sharing of best practices. When you see all these resources in one location—the Syndromic Surveillance CoP Portal—you gain a greater appreciation for the breadth of work our community is doing. The Portal links you to all these resources plus training, forums and work groups, and sign-on to the BioSense Platform.

Bookmark the Portal or add this icon to your website to connect with like-minded people who want to advance the science and practice of syndromic surveillance.

Since the SyS CoP Portal launched in February 2017, several more health departments have posted links to their websites: Massachusetts Department of Public Health; Tarrant County, Texas, Public Health; Nebraska Department of Health & Human Services (includes SyS-specific report with chart); Tri-County Health Department (Adams, Arapahoe, and Douglas Counties in Colorado); and Louisiana Department of Health.

BGG Asks Site Administrators to Review User Lists

The BioSense Governance Group (BGG) has developed guidance for using the new National View features. In mid-March, the BGG contacted site administrators to call attention to these changes and to ask them to review the user lists to ensure rights are assigned appropriately. Site Administrators must adhere to this *modified* code of conduct:

- The Site Administrator Code of Conduct was modified to clarify that the only authorized users who should have access to the national picture with data details and the chief complaint validation area are public health authorities. The Code of Conduct defines public health authorities as "an agency or authority of the United States, a state, a territory, a political subdivision of a state or territory, or an Indian tribe, or a person or entity acting under a grant of authority from or contract with such public agency, including the employees or agents of such public agency or its contractors or persons or entities to whom it has granted authority, that is responsible for public health matters as part of its official mandate."

- Site administrators are now able to control who has access to the National View-Aggregate Only, National View-Data Details, and Chief Complaint Query Validation Tool. By default, all Access & Management Center (AMC) accounts created before this change could access these tools.

If you are a site administrator and want to view or modify a user's access to these tools, click the Manage Users tab in the AMC. Select a user, and then click Edit. There are a series of check boxes under Account Information that will allow you to grant or remove access to these tools. Please verify that these boxes are correctly checked or unchecked. To get a copy of the new Code of Conduct, please contact the NSSP Service Desk.

Surveillance Knowledge Repository Is Now Live

The NSSP Community of Practice has patiently awaited the International Society for Disease Surveillance (ISDS) Knowledge Repository (KR). Good news. The wait is over. ISDS is proud to announce the beta release of the Surveillance Knowledge Repository at https://www.surveillancerepository.org/search. This new tool is a searchable database of syndromic surveillance (SyS) resources, webinars, reports, white papers, best practices, and more.

The Surveillance Knowledge Repository also includes a process for ongoing review and curation of content through user-submitted comments. If you would like to submit a comment on a resource, please register as a user of the Knowledge Repository by using the same email account associated with your ISDS membership account. The Knowledge Repository will be scalable to evolving needs of the community as will the centralization and improved access to past project artifacts and current relevant resources, such as ISDS conference abstracts and weekly Scopus* literature reviews. If you would like to submit feedback on the Knowledge Repository, suggest a resource to be included, or volunteer, please email Emilie Lamb at elamb@syndromic.org.

Another way to access the Knowledge Repository is through the Community of Practice Portal—your window into content that is tailored for practitioners who want to integrate SyS more fully into practice. The Portal's center column includes links to the Knowledge Repository and to the NSSP Resource Center. If you haven't visited the Resource Center yet, it contains the Quick Start Guides, onboarding documentation and related forms, and recently introduced Data Dictionary.

*The Scopus database of abstracts, citations, conference proceedings, and peer-reviewed literature is widely used by researchers in academia, business, science, and government.

Adminer? RStudio Professional? How to Select the Best Tool for the Task

Not sure how the two compare? The NSSP Team frequently gets asked the difference between Adminer and RStudio Pro, oftentimes *after* an attempt to use Adminer for a task it wasn't designed to do. Adminer was one of the first tools we put on the BioSense Platform to replace the BioSense 2.0 feature PHPmyAdmin. Since then, we have upgraded RStudio to RStudio Professional and upgraded the base R language. Generally speaking, RStudio Pro is a versatile program that will meet all your analysis needs. RStudio Pro can also be used to launch SQL queries and R-specific code. Adminer, put simply, is perfect for a quick double-check of smaller data—for example, those data you have in staging during an onboarding test. Essentially, Adminer is a good choice if you want to run SQL queries to get a snapshot of data for investigative purposes and are querying fewer than 500 rows of data.

As for running SQL queries against larger production data, SQL queries can be run in R against larger data *with minor adjustments to the SQL code.* If you have tried to do this unsuccessfully in Adminer, please let us help you. To run your SQL queries through R, submit a ticket to the NSSP Service Desk and request *Data Support.* If you need assistance with R-specific code or want to learn more about available R packages, please submit a ticket to the NSSP Service Desk and request *R Support.*

BioSense Platform Comparison of Adminer with RStudio Professional			
Tool	**Description**	**Good for…**	**Not so good for…**
Adminer	SQL-based tool used to capture a snapshot of data for *investigative* purposes	▪ Querying small amounts of data **(<500 rows)** ▪ Viewing your site's Master Facility Table ▪ Verifying data in the BioSense Platform archive (raw, processed, exceptions tables) ▪ Accessing a single database with view	▪ Large data sets (500 or more rows)
RStudio Pro	Integrated development environment for R that lets you access and analyze SQL data stored on the BioSense Platform	▪ Verifying data in the BioSense Platform archive (raw, processed, exceptions tables) ▪ Confirming info in Master Facility Table ▪ Accessing a single database with view into all site data ▪ Viewing and querying multiple databases and data tables ▪ Querying large data sets **(>500 rows)** ▪ Visualizing data ▪ Analyzing data ▪ Sharing projects ▪ Running multiple versions side-by-side or at the same time	▪ Someone who doesn't want to do programming ▪ Someone unfamiliar with R

NSSP Will Evaluate Transition to BioSense Platform

The NSSP Team plans to evaluate the transition to the BioSense Platform. This evaluation will give us a better understanding of how well the new Platform and tools function, if the tools meet user's needs, and what, if anything, needs to be improved now or added to the list of future enhancements. We have assembled an evaluation team that is working with various partners and the BioSense Governance Group on an evaluation plan and data collection tool to ensure a robust evaluation that will meet the needs of CDC and the syndromic surveillance community. Next, we will ask site administrators and select Platform users to fill out a survey.

If you have questions, please contact NSSP Health Scientist Cassandra Davis at vts4@cdc.gov.

How to Change Your AMC/ESSENCE Password

By default, the Access & Management Center (AMC) and ESSENCE password expires every 90 days. An expired password affects both AMC and ESSENCE logons. BioSense Platform users who need to change passwords can follow these steps to retain access to ESSENCE. Please remember that you'll need to perform this action separately for both production and staging environments.

1. Go to the AMC:
   - Production: https://amc.syndromicsurveillance.org
   - Staging/Onboarding: https://stage-amc.syndromicsurveillance.org

2. If your password has expired, you'll be prompted to review the Code of Conduct and to change your password when you log in to the AMC. Complete the steps as directed by the AMC.

3. Once you've successfully changed your password, immediately use it to log in to the AMC and ESSENCE.

If you are unable to log in to ESSENCE, try logging in to the AMC to ensure the password is valid. If you still experience difficulties, please contact the NSSP Service Desk.

UPCOMING EVENTS

Mondays	Onboarding Support Calls: 3:00–4:00 PM EDT. The call on April 10 will focus on how to complete and submit the Master Facility Table for onboarding.
Wednesdays	Data Validation Support Calls: 3:00–4:00 PM EDT
April 7, 2017	Production deployment schedule for SFTP/PHIN MS server will be announced.
April 15, 2017	Deadline for nominations: NSSP Community of Practice Steering Committee. Submit nominations to Emilie Lamb at elamb@syndromic.org
April 18, 2017	Scheduled vendor patches in staging environment: 6:00–10:00 AM EDT
April 20, 2017	Scheduled vendor patches in production environment: 6:00–10:00 AM EDT
April 21, 2017	Updates to Master Facility Table are due to NSSP.
April 24, 2017	Release of updated Access & Management Center (AMC). Release includes user group functionality for site administrators.
April 25, 2017	Surveillance Community of Practice Call. Merges BioSense User Group (BUG), Meaningful Use, and Public Health Practice community calls. Facilitated by ISDS: 3:00–4:30 PM EDT. Advance registration required.
April 25–28, 2017	2017 National Public Health Preparedness Summit; Atlanta, Georgia
June 4–8, 2017	2017 CSTE Annual Conference: Cultivating an Environment for Better Health; Boise, Idaho
July 11–13, 2017	2017 NACCHO Annual Conference: Public Health Revolution: Bridging Clinical Medicine and Population Health; Pittsburgh, Pennsylvania

LAST MONTH'S TECHNICAL ASSISTANCE

March 3, 2017	Webinar: ISDS Website Demo, led by Mark Krumm of ISDS.
March 7, 2017	Webinar: ESSENCE Training on Using Queries, led by Wayne Loschen of Johns Hopkins University Applied Physics Laboratory.
March 21, 2017	Scheduled vendor patches in staging environment: 6:00–10:00 AM EDT
March 23, 2017	Scheduled vendor patches in production environment: 6:00–10:00 AM EDT

NSSP Server Upgrades

In March, NSSP successfully upgraded the **staging** server that receives data and hosts SFTP and PHINMS services. An upgrade to the **production** server is planned for mid-April. We ask that site administrators ensure every *feed administrator* successfully submits at least one test message per feed to avoid disruption to the connections when the production server is upgraded.

Second Quarter MFT Planning

We are planning NSSP onboarding activities for the second quarter of 2017. Beginning the first week in April, we will provide site administrators with a copy of their Master Facility Table (MFT) and ask that they update it for facilities scheduled to onboard in May, June, and July 2017.

The deadline to submit updated MFTs is **April 21, 2017**. Facilities that have not been added by the April 21 deadline will be added on a best-effort basis. Site administrators and onboarding coordinators with questions about how to complete and submit the MFT are encouraged to attend the April 10, 2017, onboarding conference call.
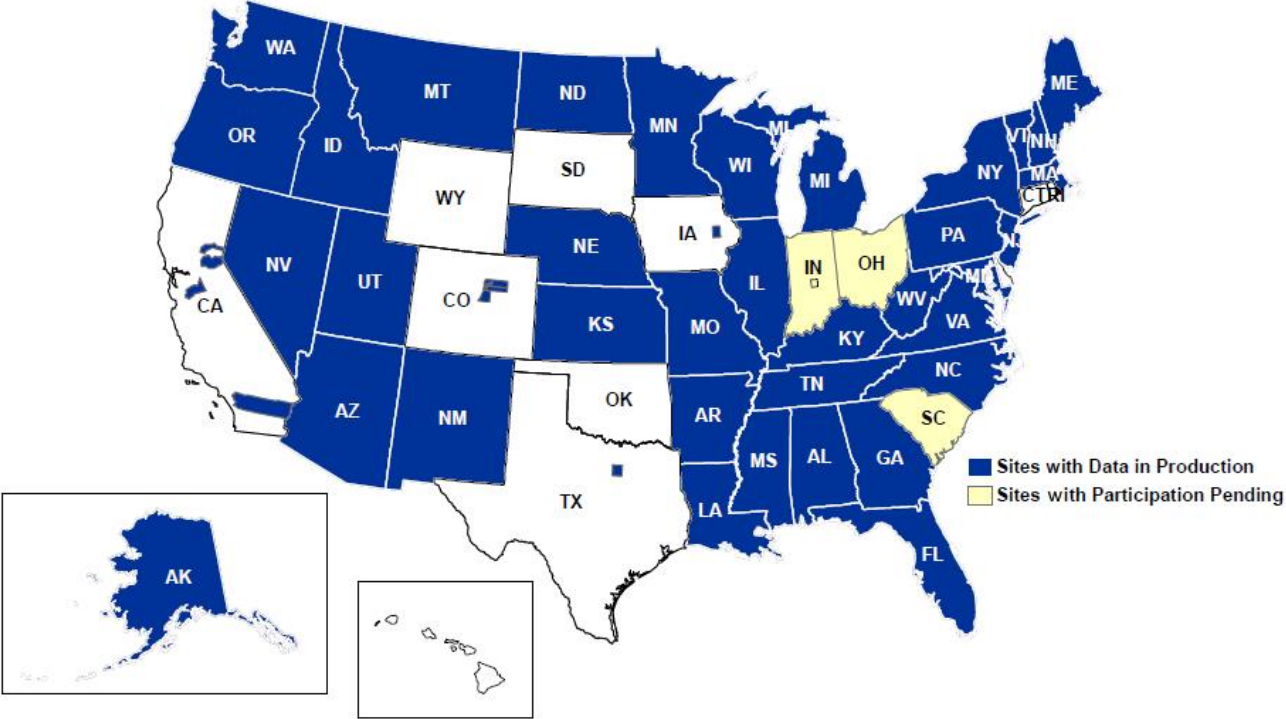
What's Your Preference?

- Do you prefer **online** to **print** onboarding documentation? **Both**?
- Does onboarding need more explanation? If so, what parts?

Provide recommendations to the NSSP Service Desk by selecting User Feedback.

Onboarding Support

Conference calls are held by invitation every Monday, 3:00–4:00 PM EDT, to discuss the process and to answer questions in a group forum. The April 10, 2017, onboarding support call will be open to all site administrators and onboarding coordinators who have questions about the planning and prioritization process for onboarding facilities to the BioSense Platform.

Data Validation Support

Conference calls are held every Wednesday, 3:00–4:00 PM EDT, to assist with data validation compliance. For more information or to download the template for validating data, contact the NSSP Service Desk.

NSSP receives data from more than 4,000 facilities. These facilities represent about 60% of all emergency department visits in the country based on American Hospital Association data. Currently, 47 sites in 40 states participate in the NSSP. Two sites transitioned but paused their move to production. At least 14 sites are working on local data feeds with plans to transmit data to the BioSense Platform soon.

Definitions: NSSP consolidates facilities that provide data under a single data administrative authority called a *site administrator*. These facilities and single-site administrator constitute a *site.*

GRANTEES AND PARTNERSHIPS UPDATES

NSSP Project Officers Can Help You Achieve Success

CDC employs project officers (POs) to oversee grants and cooperative agreements. Each day, the POs work with thousands of grantees and billions of dollars within CDC's portfolio of partner funding and investments. They provide stewardship and oversight on a range of administrative and programmatic aspects of grants and cooperative agreements throughout various state, tribal, local, and territorial health agencies.

Within CDC's Division of Health Informatics and Surveillance, Partnerships and Evaluation Branch (PEB), three POs provide technical assistance to 65 public health jurisdictions. Of these 65 jurisdictions, 31 receive funding via a CDC cooperative agreement to build

syndromic surveillance capacity in their states and within the National Syndromic Surveillance Program (NSSP). The remaining 34 public health jurisdictions are unfunded and either share syndromic surveillance data with the NSSP platform or have expressed an interest in sharing data in the near future.

Project Officers

Philip Baptiste joined CDC in 1989 as a public health advisor. In 2006, Philip became part of the senior management team for extramural projects in what is now CDC's Center for Surveillance, Epidemiology, and Laboratory Services. Under the current NSSP funding opportunity announcement (FOA), Philip oversees nine NSSP sites (Alaska, Arizona, Denver, Idaho, New Mexico, Nevada, Oregon, Utah, and Washington). Philip also serves as Interim Deputy Branch Chief for PEB.

Kim T. Raymond began her CDC tenure in 2000 as a PO and policy analyst working for the National Center on Birth Defects and Developmental Disabilities. In 2015, Kim joined PEB as a PO and oversees 12 sites under the current FOA (Alabama; Georgia; Florida; Kansas; Louisiana; Missouri; Nebraska; North Dakota; Tarrant County, Texas; Tennessee; Virginia; and West Virginia). Kim also mentors NSSP's newest PO on the PEB Partnership and Support Team.

Antheny Marie Wilson joined CDC and NSSP in January 2017. Antheny transitioned to CDC from the Veterans Health Administration where she worked as a Health System Specialist for 9 years. As an NSSP PO, Antheny oversees 10 sites under the current FOA (Connecticut; Illinois; Maine; Marion County, Indiana; Massachusetts; Michigan; New Hampshire; New Jersey; New York State; and Ohio), and she provides technical assistance to the 34 unfunded sites that either share or plan to share data with NSSP in the near future. Antheny is also NSSP's Meaningful Use (MU) contact and will answer MU questions submitted to the NSSP Service Desk.

COMMUNITY OF PRACTICE UPDATES

Steering Committee

ISDS is soliciting nominations for membership on the National Syndromic Surveillance Program Community of Practice (NSSP CoP) Steering Committee
. This committee helps set the tone for the NSSP CoP—identifying what's important to the community—and then sets the agenda and facilitates whatever major activities the community undertakes. The committee's support is needed to advance the use and practice of syndromic surveillance and to enable a peer-to-peer collaborative environment that fosters knowledge sharing and partnership.

To submit a nomination, email Emilie Lamb at elamb@syndromic.org by **April 15, 2017**. For more information about member responsibilities and the nomination process, click **here** to visit the ISDS news page.

Updates to Messaging Guide

ISDS and CDC are partnering to update the *PHIN Messaging Guide for Syndromic Surveillance* and are looking for members of the Community of Practice to assist with reviewing and commenting on this latest version. If you are interested in helping with this project, click here to join the PHIN Message Guide Workgroup on the ISDS website. Additionally, you can find the current and previous versions of the *PHIN Messaging Guide for Syndromic Surveillance* in the Surveillance Knowledge Repository here.

Other CoP Updates

Join monthly surveillance call. Please join us for the newly-formed, monthly Surveillance Community of Practice call. The purpose of this call is to bring together various stakeholders with a vested interest in this field and spark collaborative efforts to share guidance, resources, and technical assistance. The call was created by merging the BioSense User Group (BUG), Meaningful Use, and Public Health Practice community calls. The next call will be held **April 25, 2017, 3:00–4:30 PM EDT.** Click here to register.

Get involved. ISDS is looking for community members to join its Surveillance Knowledge Repository Curation Work Group. If you're interested, please register as a member and then volunteer your expertise.