

Orpheus User Feedback Meeting

Date: July 12th

Time: 1:30-2:30 **Place:** PSOB AOC

ALL DATA FROM SCREEN SHOTS SHOWN IN THESE MINUTES ARE FAKE

Counties: Baker; **Benton** (Gerald); Clackamas (); Clatsop (); Columbia (); Coos (); **Crook** (Karen, Vicky); **Curry** (Michelle); **Deschutes** (Jill, Kari, Jenny); **Douglas** (Bailey, Laura); Grant (); Harney (); Hood-River; **Jackson** (Jeanelle, Al); **Jefferson** (Joy); Josephine (); **Klamath** (Sharon); Lake; **Lane** (Michelle, Sidney); Lincoln (); **Linn** (Debby); Malheur (); **Marion** (Yuritzzy); Morrow (); **Multnomah** (Perry, Joan, Marta,); NCPHD (); **Polk** (Martha); **Tillamook** (Christina); Umatilla (); Union (); Wallowa; Warm Springs (); **Washington** (Sue, Ivette, Kathleen, Jennifer); Wheeler; **Yamhill** (Kara, Nicole, Dominique)

State: Sara, Cedric, Shannon, June, Kiley, Alyssa, Melissa, Tasha, Nasreen, Rob, Heather, Julie, Emilio

Purpose: To share new features, user issues and gather feedback on development priorities for Orpheus, Outbreaks and Case log applications

Outcome: Users are kept informed about development projects and their needs are identified and prioritized.

AGENDA / BACKGROUND	Presenter(s)	Time
<p>Introductions -- 5 min</p> <p>June has been recording both the training webinars and the user group meetings. If you miss a session and would like to listen, send June an email and she can send you a link. They are uncut so we do not post them to the web.</p> <p>Electronic Laboratory Reporting updates/issues--all-- 5 min</p> <p>No updates</p> <p>New Orpheus beta screens rolling out: TB, Enteric, Animal bites, Animal rabies --all- 5 min</p> <p>Tasha asked if the travel button for Hep A is useful? It collects a lot of information that we do not use. This is the pop up screen that capture all the different countries and dates, reason for travel. It is necessary for some diseases but not for Hep A data needs. Do the counties find the button useful or do you want to write counties in the text field. Some users indicated that the travel screens are awkward. Yes, remove the travel button for Hep A.</p>		<p>Email June if you are interested in viewing past webinars, they are unedited.</p> <p>We have not received a lot of feedback on these new layouts. We have switched TB Royal Orpheus to be the default and the message is no longer displayed.</p>

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Feedback on new Web-based case log data entry—all

REAL-D data fields and online training workgroup- Heather – 30 min

Heather presented on the background of REAL D the new race, ethnicity, language, and disability fields that we will be collecting. There is a power point available if you would like to view. Heather has been involved in some focus groups, often discuss which white category to choose.

What do you do when you gather information from a different source, and it is discrepant? There are medical records, ELRs, then you interview the case. Heather wanted to know about how the data were collected. We do not know. Self-reported from interview would be the most accurate.

We will need to add additional new fields, we would want to cross walk to the older data. Kathleen mentioned Kaiser has some of these new race categories. How does this compare to the ELR.data? State recently has remote access to Kaiser but our Epic view we do not see these more granular categories. Question – is this from viewing Kaiser records or seeking care there and filling out a form? Race data seems to be most accurate for TB cases. Some people document race in the notes. Most users have interpreters available to them when someone does not speak English. Should we add a checkbox that there was an interpreter? We are considering a delay in adding the disability questions – might put them as follow up questions. If counties have a need to collect these, send June an email if you would prefer we include them while adding the REAL fields.

Other items – Contact transfer.

This has been recently reported. Might only happen when cases are being merged. Users asked if anyone else is experiencing this.

Recent records –

Updates to the recent records should not only show which records you interacted with.

Notes disappearing – a user has reported this, are others experiencing this. No other users report this

West Nile Virus- Emilio – 10 min

We do test for WNV at OSPHL. Recommend counties contact clinicians to send serum to OSPHL. They have funding to do this testing. Last year we had 7 human cases but only one specimen made it to the

No feedback on Case log
Please send any feedback to the tech team.

How well is language field in Orpheus utilized. How are users using this? How are interviews with non-English speakers conducted? Use interpreter and indicate the language when English is not the primary.

If a county has a need to collect ability/disability data for their own needs or use, send June an email. We decided to delay this for now.

No one experiencing issues with contact transfers.

No one reporting notes disappearing.

Please send an email to June if you are experiencing any of these issues.

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OSPHL. We also do mosquito testing if the county has a vector control district. We also test animals(horses). If you get a phone call on testing animals for WNV we would like to get them tested, these need to be routed through a Vet. The specimen is generally blood and this is done at Oregon State University. CDC is interested in testing horses. Historically when we test birds, we used to collect bird, now there is a new method to test birds, a rapid FTA card test. These new card tests are cheaper and quicker to process. To test the bird, you use a swab to collect from the oral cavity and throat of the bird. The bird can then be double bagged and disposed of. For human testing , the lab information is the most important to enter into Orpheus. We are only interested in IGM positive (recent) cases, not interested in IGG positive (past infection). Then please to assess whether exposure was in Oregon. These samples will be sent onto CDC, WNV cross reacts with St Louis and Eastern Equine encephalitis. Thus, we want to confirm these. Confirmed cases are ones that have been tested and confirmed at CDC. Blood bank cases should be considered suspect cases. When you get a IGM from a blood donor, consider it a suspect case. Private lab IGM are presumptive cases. If you hear about a case without any lab results, this should be a no case. Wait for lab data to determine suspect, presumptive or confirmed. We maintain a current Oregon WNV map online. This is updated as soon as we have a report. Most cases remain in Eastern Oregon and are among mosquitoes.

Sue in Washington county – animal bites screen – under the animal victim when there is more than one animal, can we add more. Under the human victim you can add more than one. Would like this for animals. Also, there is no attachment screen to this – can only upload one document. Would like to have the attachment screen for animal bites.

Training topics (first Wednesdays 10:30-11:30) – 5 min

August 1st –Tick borne illness?

September 4th – County Review Reports – update. New CD review tool is approved, and will be implemented in October.

REAL D training workgroup? Any need for a new user training? Intermediate? Other topics

Future User Group Meetings

Aug 9st 1:30-2:30

Sept 13th 1:30-2:30

We are interested in testing horses, birds and humans for west Nile virus. You can order the FTA cards from Oregon State online. Most LHDs order about 10 of them. This is for quick and easy testing for birds.

Feel free to call Emilio if you have questions about WNV in general or testing.

Add ability to upload more than one document to the animal bites screen. Also, cannot create a quick note, always goes to the note screen.

When typing a note, would be nice to have a way to cancel out of the note.