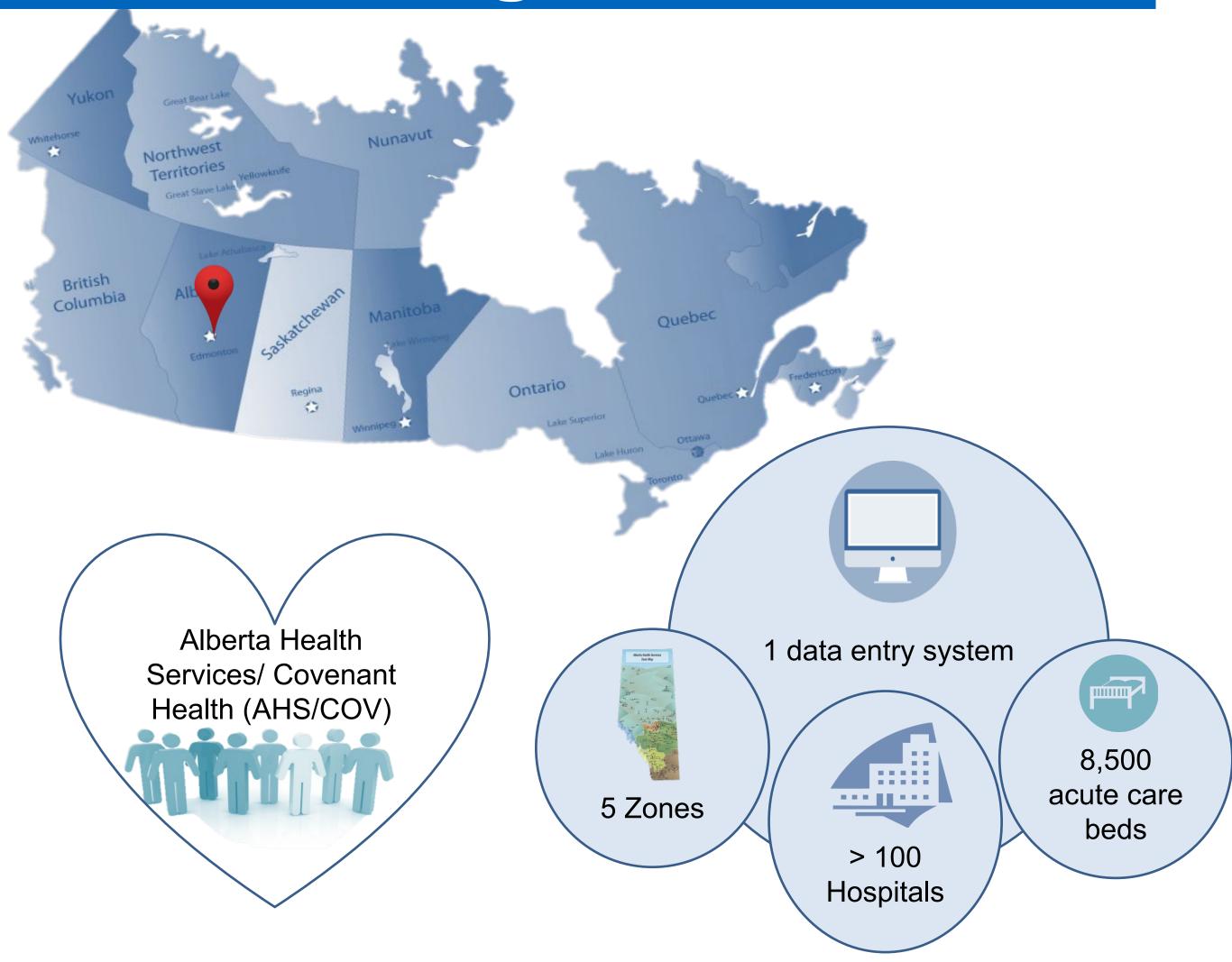
When it comes to surveillance, are you a CAT person?

J. Ellison, B. Chow, L. Armstrong, M. Buchanan-Chell, K. Cannon, K. Decker, A. Howatt, S. Jagpal, K. Versluys, T. Pfister, K. Bush, AHS IPC Data Quality Working Group

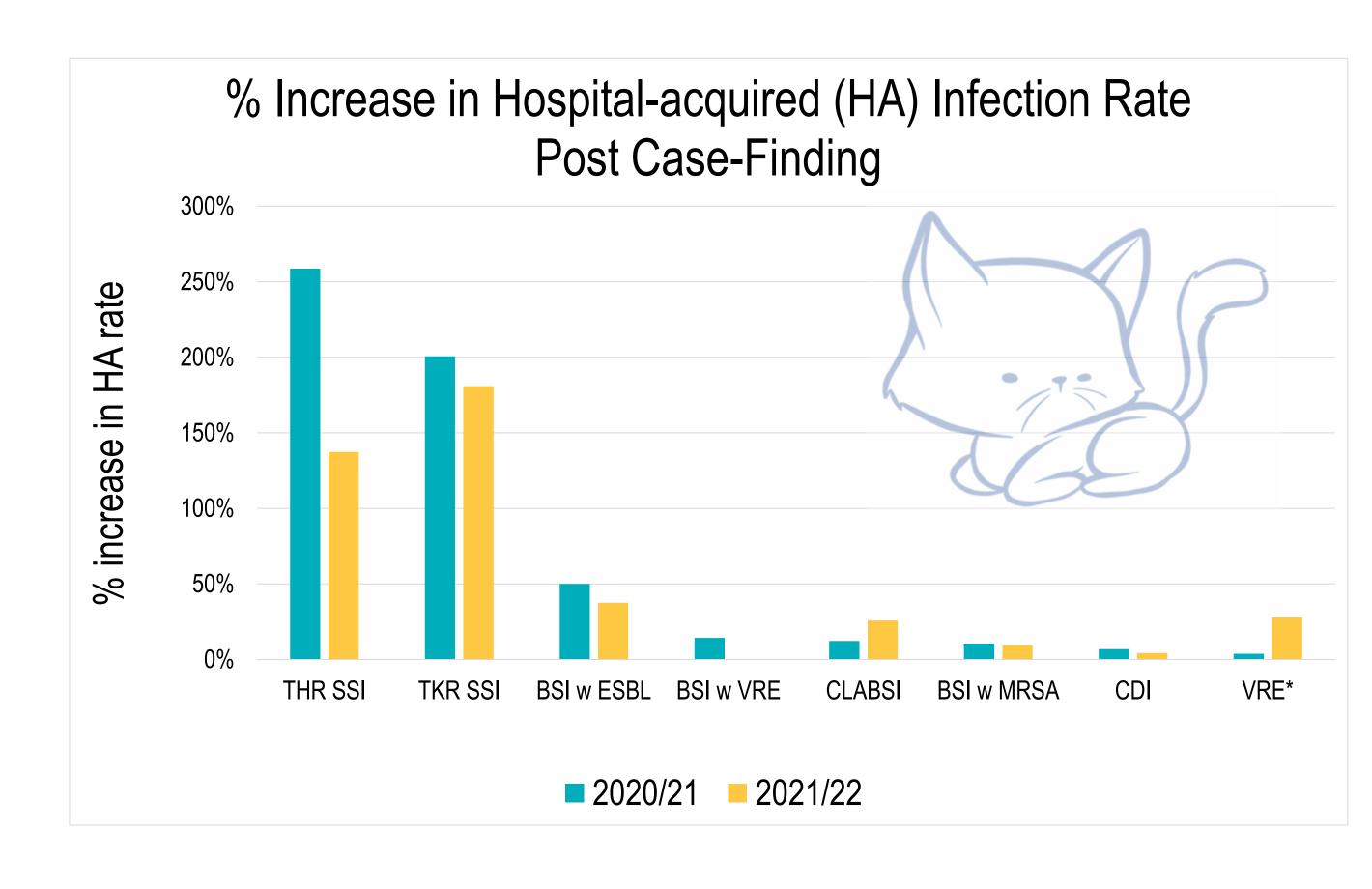
Background



Completeness

COMPLETENESS: all cases are included, and all data variables are entered

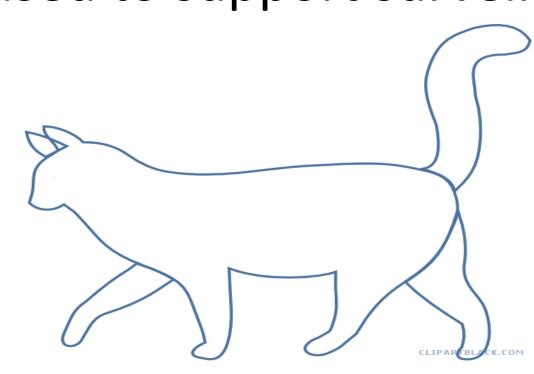
 Assessing whether all cases are included is challenging and requires additional information, resources and investigation



VRE*: includes all first VRE infections identified in acute care settings

Issue / Project

During the COVID-19 pandemic, infection control professional's (ICPs) workload was consumed with pandemic priorities, and routine surveillance was deferred. How can high data quality be maintained? Can alternative methods be used to support surveillance?

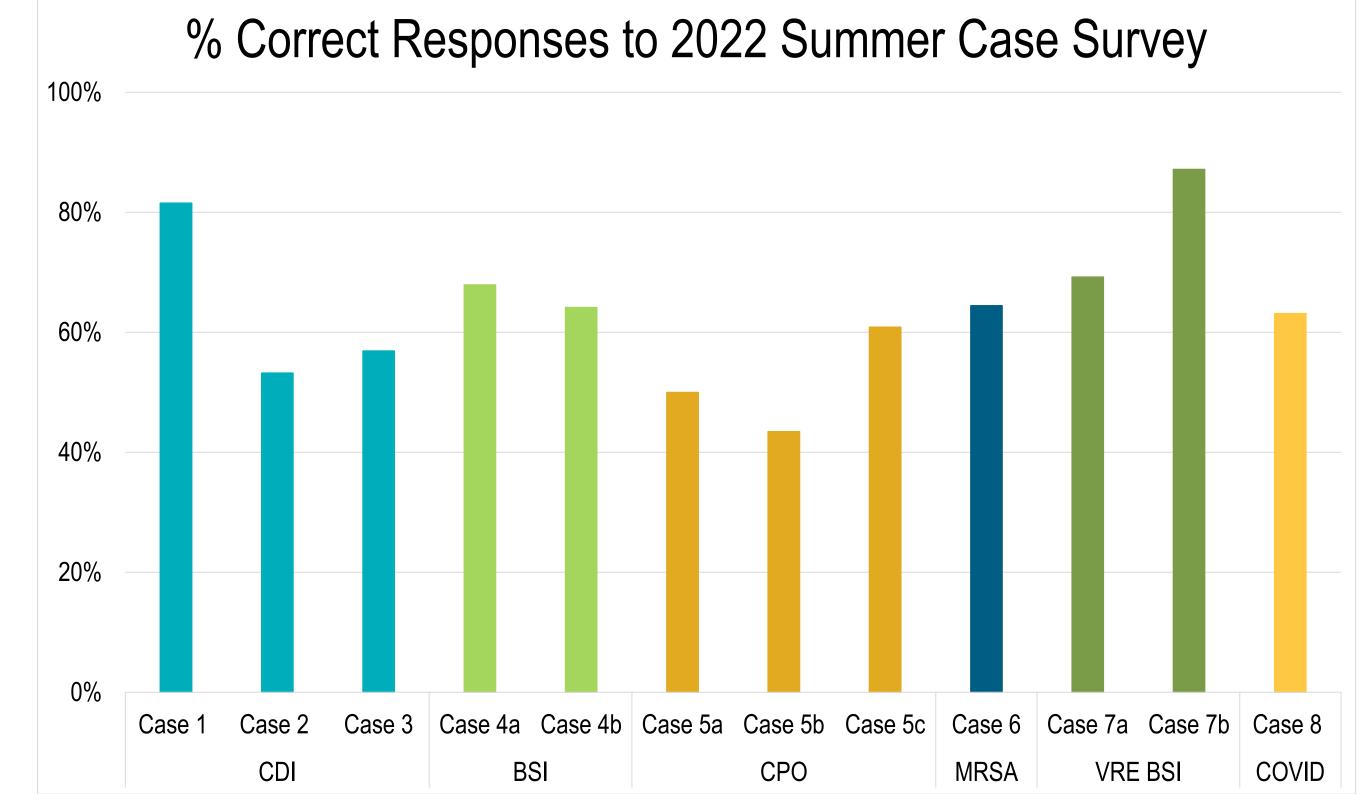


In public health surveillance, three characteristics of high-quality data are Completeness, Accuracy, and Timeliness — which can be summarized using the acronym CAT 7.5 Key characteristics of data quality in public health surveillance (cdc.gov)

Accuracy

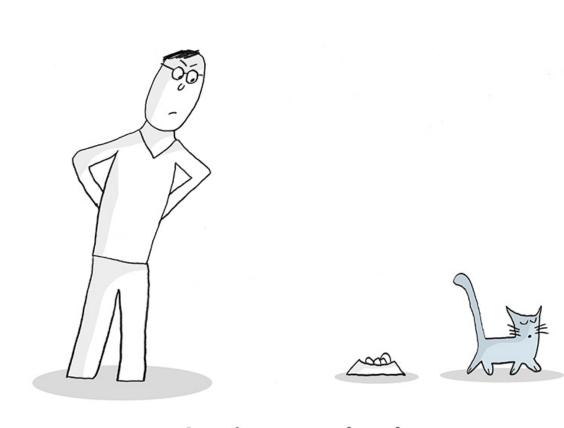
ACCURACY: data entered reflect the truth

- In 2021/22, the Surveillance and Standards (S&S) team reviewed 30.5% (6,574 records) of all reportable surveillance cases errors remain <5%
- Challenging cases from Surveillance modules sent to staff over summer



Lessons Learned

- ✓ COVID-19 pandemic placed increased demands on IPC programs
- ✓ Data Quality is impacted when demand is high for IPC response
- ✓ Active SSI surveillance affected during pandemic, but supported by subsequent supplemental casefinding
- ✓ Multi-factorial approach is necessary to support high-quality data



Insist on the best.

https://www.boredpanda.com/21-hilarious-cute-and-insightful-liflessons-from-cats/?media_id=367643

Timeliness

TIMELINESS: data are available and disseminated when needed

- Data entry: Cases are entered into the surveillance platform within 7 days of receipt; dashboards display the data delay.
- Monthly Data Quality Forum 17 sessions in 2021 and 2022 to disseminate protocol updates and reinforce data quality to all provincial ICPs.
 - Avg. attendance 78 IPC program staff (range 50-102)
- Monthly Data Quality Working Group ICP representatives from all five zones and provincial S&S team:
 - Develop, review and update protocols and training materials;

Alberta Health

Services

- Promote inter-rater reliability;
- Quarterly Reports posted on Internal AHS website; Shared and reviewed at provincial IPC Surveillance Committee and provincial IPC committee.