

# THE PREPAREDNESS POST

UTAH DEPARTMENT OF HEALTH  
VOLUME 2, ISSUE 1

## Utah Launches New Disease Tracking and Management System

By David Jackson

Utah public health officials have a new tool in their arsenal for disease tracking and management. Last month, a new system, called TriSano™ was successfully launched and implemented by the Utah Department of Health (UDOH) and the 12 local health departments. TriSano™ is the product name for the Utah-National Electronic Disease Surveillance System (UT-NEDSS).

The major undertaking began in November 2007 when UDOH, in collaboration with Utah's local health departments (LHDs), Collaborative Software Initiative (CSI), a Portland-based software development company, and the Utah Department of Technology Services (DTS), began working to develop a more modern, web-based disease tracking and management system. Officials believe the new system will improve public health's ability to track, control, and prevent infectious diseases and outbreaks statewide.

Not only is UT-NEDSS a new disease tracking and management system, it is the first open source, web-based infectious disease reporting and management system in the country. That means the software is copyrighted and licensed making it free to use. All users have access to the source code that defines it. In addition to infectious diseases, TriSano™ tracks cases of child blood

lead poisoning, which is helpful in directing public health prevention efforts. Dr. Robert Rolfs, UDOH State Epidemiologist, hopes that public health agencies eventually use UT-NEDSS to track other things such as chronic diseases/conditions or reportable injuries.

As a secure, web-based system, UT-NEDSS enables all LHDs and the UDOH to share the same database. Prior to launching TriSano™, Utah's individual health departments used separate systems to enter disease data. UT-NEDSS will eliminate duplicate data entry, resulting in cost savings and improved efficiency. TriSano™ has also enabled public health to go a little greener as the system's ability to electronically route disease data between health jurisdictions has resulted in significantly less faxing. From a public health perspective, UT-NEDSS centralized database will improve public health's ability to detect and manage outbreaks as well as track, control, and prevent infectious diseases, hospitalizations and associated deaths

Besides the features already described, TriSano™ has many more useful tools. One of the unique features is the form builder tool. Utilizing UT-NEDSS, public health has the ability to build disease investigation forms

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### Upcoming Events

- Laboratory ship and pack training: March 26
- Utah Responds Conference: April 27-28
- Public Safety Summit: May 12-13
- UPHA: May 18-20
- SNS trainings: May 19-20
- SNS full scale exercise: August 3-5



<https://www.utah.train.org>

To find preparedness training

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## New Disease Tracking System *(continued from page 1)*

(disease-specific questionnaire used for disease investigations) to accommodate new and emerging diseases, conditions, or outbreaks. The tool, combined with a centralized database, can allow Utah public health officials to share information more efficiently, identify risk factors, and more effectively gain an upper hand during an unusual disease event. The system's effectiveness doesn't stop at Utah's borders. TriSano™ can electronically transmit disease data to the Centers for Disease Control and Prevention (CDC). The CDC can then use the information to monitor and evaluate disease trends across the country.

The UT-NEDSS project team will continue to build new features and refine the system throughout 2009. The goal is to develop advanced case, contact, and outbreak management tools to assist public health in controlling and preventing diseases. The project team also hopes to integrate the system with some reporting laboratories, to enable faster lab result reporting and therefore quicker detection of abnormal disease activity.

Due to the open source nature of the system, it may gain exposure at both the national and international level, which could result in a stronger collaborative effort with other public health officials to further develop and refine the software. A stronger community approach to building and refining the software could benefit Utah public health for many years to come.

There are two Web sites for more information about UT-NEDSS: the UDOH project site (<http://health.utah.gov/nedss>) and CSI's open source site (<http://www.trisano.org>).

## Preparedness Systems Updates *by Christine Warren*

We are happy to announce that the Utah Department of Health will be able to fund and perform the volunteer BCI (criminal history) records check on those who are registered in the healthcare volunteer registry system. There had been earlier discussions regarding financial and logistic obstacles with BCI checks for volunteers.

**Good news on the Emergency Healthcare Volunteer Network System!** We are anticipating the March 27th launch and feel confident that the "trouble" areas will be resolved. Discussions with the MRCs and the ERCs from the local health departments have been very helpful in demonstrating what changes could be made to make the system more beneficial. We will continue working with the vendor, Gold Systems, to make additional improvements. Once the modifications are fine-tuned, we will schedule trainings.

**Look for the launch!** We have been collaborating with Gold Systems to create a new Web site, logo, and name for the healthcare volunteer system.

**More big news!** The Utah Notification & Information System (UNIS) will be upgraded within the next few months. We are confident it will be a huge improvement over our current system. On a sad note, Laura Melton who was our UNIS "registration guru" has resigned. She was a tremendous benefit to our UNIS program and was able to effectively register nearly 2,000 people during her two plus years with the UDOH Preparedness Program.

## Good News from the Utah Public Health Lab! *by Sanwat Chaudhuri*

Kudos to the UPHL chemical emergency lab program of the Bio-terrorism grant! Each year, the program must demonstrate proficiency in packing and shipping blood and urine samples exposed to chemicals in an emergency/terrorism situation.

To accomplish that goal, the Centers for Disease Control and Prevention (CDC) conducts a Specimen Collection Packaging and Shipping (SCPAS) exercise. Last year, Utah received an unsatisfactory score, but was given a chance to improve during another exercise. We received a satisfactory score the second time. This year, Utah participated in an exercise and received 100% the first time! No need to re-take the test!

## SNS Distribution Functional Exercise *by Mindy Johnson*

On December 10, 2008 the Utah Department of Health (UDOH) Preparedness Program led a statewide exercise testing our ability to distribute antivirals or other medications needed in the event of a public health emergency. The UDOH, along with all state health departments in the nation, is funded through the Centers for Disease Control and Prevention (CDC) to ensure medication and supply delivery plans are in place and are tested.

The exercise used the scenario of a pandemic influenza, and challenged state and local partners with the task of getting a medication package from the CDC to local areas in under 48 hours. Warehouse operations, interagency communications, and security were just a few of the operations tested in the exercise.

Participants included the State and all 12 local health departments; Utah Department of Alcohol & Beverage Control; Utah Department of Public Safety (Highway Patrol & Homeland Security); Utah National Guard; Old Dominion Freight Lines; and local law enforcement.

The exercise was a success! Medications arrived in each area smoothly and on time. An After Action Report, with tips for improvements and lessons learned, is available for all who participated in the exercise.



***UPCOMING: The Statewide SNS Full-Scale Exercise, August 3-4, 2009***

## PHEPAC Update *by Elizabeth Tubbs*

The Public Health Emergency Preparedness Advisory Committee (PHEPAC) held its first meeting in May of 2008. At that time, PHEPAC's co-chairs outlined the committee's first charge. The charge grew out of the final report of the Governor's Task Force for Pandemic Influenza Preparation. That report suggested a review of Utah's Pandemic Influenza Preparedness Plans. To accomplish that goal, the group formed two Technical Advisory Groups or TAGs. One to primarily focus on public health issues and another for community preparedness and essential services issues.

The sub-committees have reviewed several sections of the panflu plans, including *Surge Capacity*, *Community Mitigation*, and *Anti-viral Medication Stockpile and Use* attachments. Each sub-committee developed recommendations regarding the plans and submitted them to the full committee. The sub-committees also raised questions and made recommendations regarding the coordination of its work with that of other committees and workgroups addressing similar preparedness topics.

The co-chairs of PHEPAC (Dr. David Sundwall, Executive Director of the Utah Department of Health and Lance Davenport, the Commissioner of Public Safety) are currently in the process of compiling a report of the work accomplished so far and the next steps for the committee. This report will be delivered to Governor Jon M. Huntsman in time for the one year anniversary of the PHEPAC.



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### **Phones During an Emergency – Did You know?** *By Mike Stever*

Remember hearing this on Mother's Day or Christmas? "All circuits are busy. Please hang up and try your call again later." Telephone lines are designed to handle 10% phone use at any given time. If phone use exceeds 10%, the system becomes overloaded and local call service may be interrupted, including calls to 9-1-1. Landline and cellular telephone systems are vulnerable and can fail because of being overloaded in both day-to-day use and disaster situations. In addition, the phone service may be out due to system damaged because of accident or disaster.

Here are a few tips:

Your family emergency plan should have pre-designated plans that include instructions of what to do and meeting places in case communications fail.

Make sure those with disabilities are included in your emergency plans at home and work.

Following a disaster, even when regular telephone service resumes, out of state calls will be easier to place and will help to minimize the demand on local phone service lines. Identify an out of state contact person to provide family members the ability to check in and receive messages.

Standard "plug in the jack" phones will work if the power is out but most cordless phones will not. There is enough voltage in the line to complete a call with a standard phone, but cordless systems require an electrically fed base station to operate.

Use 9-1-1 only to report emergencies and life threatening situations. **Do Not Call** 9-1-1 for information. KSL is the primary Emergency Alert Station (EAS) for the Wasatch Front area. Tune to 1160-AM or 102.7-FM for emergency or disaster information.

Cellular phones do not provide dispatchers with the exact location information of the caller. Be prepared to provide dispatchers with your location even if it is only a milepost marker or landmark.

Sometimes when you cannot complete a cell phone call, text messages may get through.

Many cell phones have a very bright display screen that may double as a flashlight.

Check that telephone receivers are in their cradle following an earthquake.

If you have an emergency and are unable to secure a dial tone, pause and wait. Do not click the receiver as that "restarts" the call request cycle. If a dial tone is not received within 60 seconds, the system may be overloaded.

**"Luck is a matter of preparation meeting opportunity."**

**Oprah Winfrey** (*American television personality, Actress and Producer*)

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