



Reporting & Surveillance

Objectives

- Define surveillance.
- Know aims and uses of surveillance system.
- Understand the different types of surveillance systems.
- Recognize the elements of surveillance system.
- Be able to assist in establishing and evaluation a surveillance system.

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Surveillance

What is surveillance?

- The Centres for Disease Control and Prevention (CDC) defined **Public Health Surveillance** as: “**Ongoing systematic collection, analysis, interpretation** and **dissemination** of data regarding a health related event **not necessarily a disease** for use in public health **action** to reduce morbidity and mortality and to improve health”.
- In other words, it means “**information for action**”.
- It is the eyes and ears of public health.
- It a very **important tool** for public health
- It is a network of people and activities to keep this process.
- Functions at local to international levels.

Describing Surveillance:

- Surveillance systems provide descriptive information regarding **when and where health problems are occurring and who is affected** (the basic epidemiologic parameters of time, place, and person).

Surveillance and Monitoring: 438

<ul style="list-style-type: none">• Surveillance and Monitoring are often used interchangeably but they are distinct.	
Monitoring More specific, to evaluate a program and is considered a specific term under the broader term of surveillance.	Surveillance
<ul style="list-style-type: none">• Refers to the ongoing measurements of health services or a health programme with a view to ‘evaluate’ the particular programme / service or intervention, with constant adjustment of performance in relation to the results.	<ul style="list-style-type: none">• Surveillance is a broader term
<ul style="list-style-type: none">• Is concerned with a specific target <u>Example:</u> vaccinated infants	<ul style="list-style-type: none">• Is concerned with the general population

Surveillance

Objectives of Public Health Surveillance

- To study the trends of disease.
- Early warning of epidemics
- To provide quantitative estimates of magnitude of health problem.
- To study the natural history of disease (disease progress)
- Demonstrating the spread of a disease in time and Place.
- To develop epidemiologic research questions.
- To test epidemiologic hypothesis.
- Evaluation of control and preventive measures Breast cancer screening
- Monitoring of change in infectious agent like changes in malaria species
- Detecting changes in health practices

Main aim: Disease control and prevention

1. It is essential to set the objectives when you establish a surveillance system. It is not necessary to have them all you can have only one objective but you should have them at least.
2. A surveillance system can meet one objective while another one can meet multiple objectives.

Features of a Surveillance System:

- Practical, **clear case definitions** for each disease.
- Workable, uniform and **continuous** data collection methods.
- **Rapidity** of collection, analysis, interpretation and dissemination of data.

Surveillance

Criteria for Identifying High Priority Areas for Establishing Surveillance Activities:

Recall that surveillance is a network and aims for the general public so definitely it comes with a high cost. So not everything should be surveilled. Based on these criteria we should prioritize certain programs.

- 1 | **Frequency of the disease:** Incidence of mortality, and incidence/prevalence of morbidity due to the disease
- 2 | **Severity:** Case fatality ratio, proportionate mortality ratio, hospitalization rates due to the disease, disability rates
- 3 | **Economic impact:** Direct costs that add due to medical treatment for the disease and indirect costs due to reduction in productivity
- 4 | **Preventability** can you perform an action?
- 5 | **Public interest:** Community and political attitudes towards the disease

Types of Surveillance

Types	Item	Description
Passive	Definition	<ul style="list-style-type: none"> ● WHO: Regular reporting of disease data by all institutions that see patients (or test specimens) and are part of a reporting network. ● There is no active search for cases. ● Relies on the cooperation of health-care providers — laboratories, hospitals, health facilities and private practitioners. ● This is the most common type of surveillance. Example: Reported cases of COVID-19 by hospitals.
	Uses	<ul style="list-style-type: none"> ● In this type of surveillance criteria are established for reporting diseases, risk factors or health-related events then health practitioners are notified of the requirements and they report events as they come to their attention. most imp thing is to have a clear case definition. ● The data recipient has to wait for the data providers to report. ● In most countries with a passive surveillance system, every health facility is required to send a monthly (sometimes weekly/daily) report of all cases on a standard form.
	Advantage	<ul style="list-style-type: none"> ● Simple to conduct ● Inexpensive ● Covers wide areas (whole countries or provinces)
	Disadvantage	<ul style="list-style-type: none"> ● It can be difficult to ensure completeness and timeliness of data (Because it relies on an extensive network of health workers). ● Usually underestimate the true illness burden. some institutions don't provide their reports accurately and consistently.

Types of Surveillance

Types	Item	Description
Active	Definition	<ul style="list-style-type: none"> In active surveillance the organization conducting the surveillance actively seeks the relevant information (healthcare providers are contacted and asked to provide details of any cases they have seen). Data must be obtained by searching for cases, and also by periodically contacting those who may know of cases. <u>Example:</u> Health workers go into the community, search for cases of fever and take their blood slide for malarial parasite Screening for people arriving from a certain country. Actively visiting and screening individuals in high risk areas.
	Uses	<ul style="list-style-type: none"> Active surveillance is used when there is an indication that something unusual is occurring: <ul style="list-style-type: none"> Rare disease Disease on way to eradication e.g. polio During outbreaks (very good indication) Regular outreach to potential reporters, to stimulate the reporting of specific diseases or injuries. This type of surveillance is not effective in all types of diseases, not practical.
	Advantage	<ul style="list-style-type: none"> Produce complete data of a good quality
	Disadvantage	<ul style="list-style-type: none"> Expensive high use of resources (For this reason, when it is used, it is for a limited time period).
Sentinel	Definition	<ul style="list-style-type: none"> Collect, analyze, interpret, and use data from a select subset of potential data sources. It involves only a limited network of carefully selected reporting sites. Reporting of cases of specific diseases (MI) or risk factors that may indicate that a particular preventive or therapeutic activity is not working as planned. (Identify outbreaks) <u>Example:</u> a measles outbreak in kids who were supposedly vaccinated. Injury and mental health surveillance after a disaster. Assessment of chemical exposures to children of agricultural workers. Assessment of workplace-related injuries or diseases.
	Uses	<ul style="list-style-type: none"> There is no adequate existing surveillance system. Resources do not allow for a population-based survey. Can be established for short term and/or rapid system set-up Data collected from available healthcare providers or other reporters. It is used when high-quality data are needed about a particular disease that cannot be obtained through a passive system.
	Advantage	<ul style="list-style-type: none"> Rapid Economical alternative to other surveillance methods Because it is conducted only in selected locations.
	Disadvantage	<ul style="list-style-type: none"> May not be as effective for detecting rare diseases or diseases that occur outside the catchment areas.

Data source of Surveillance

1- Death Certificates: Forms completed at time of death and signed (certified) by a physician.

Identifying information:	<ul style="list-style-type: none"> ● Demographic information. ● Place of death. ● Date and time of death. ● Factors contributing to death. ● Cause of death.
Appropriate Use of Mortality Data Disease or conditions that are:	<ul style="list-style-type: none"> ● Fatal. ● Easily ascertained at the time of death. ● Known to have a short clinical course. ● Known to have well-established risk factors.

2- Disease Registries: Cases of defined diseases and conditions are systematically reported to a central system

- Can be based in hospitals or specialty referral centers.
- Can be pathology/laboratory based.
- Best for rare events, such as **cancers**.
- Census data can be used to calculate disease rates among at-risk populations.

Advantages:

- Captures morbidity data.
- Can be linked to the other data sources.
- Can detect clusters of disease.
- Can be representative of the population.

Disadvantages

- Cannot accurately represent occurrence of very common conditions.
- Hospital-based registries tend to lack diagnostic data.
- Pathology / laboratory based registries tend to lack demographic data.

3- Health surveys:

- Format:
 - Active surveillance
 - Standardized questionnaire that can be administered at regular intervals (e.g. yearly)
 - Sample of the population
- Purpose:
 - Understand health problems and known and potential risk factors.
 - Compare the distribution of health problems between localities, districts, or countries over time (if survey is repeated).
 - Plan public health programs.

Advantages

- In-depth information, including data on risk factors.
- Identify areas of need and where to target public health programs and interventions.
- Assess the effectiveness of public health programs and interventions.

Disadvantages

- Costly.
- Self-reported data on demographics, risk factors, lifestyle, diagnoses.

Data source of Surveillance

4- Administrative Data

What are administrative data? Collected as part of the administration of a health system.

Examples:

- Hospital discharge data.
- Governmental insurance claims.
- Non-governmental insurance claims.

5- Census

- Official population count.
- Occurs on a regular basis.
- Gathers and records information on additional demographic factors (varies by country)
 - Household income.
 - Marital status.
 - Family size.
- Used as the **denominator for population-based estimates of the occurrence of disease.**

Using Census data:

Advantages:

- Information gathering is attempted for every member of the population.
- Possibility of asking a health related question (short / long forms). **Quick survey.**

Disadvantages:

- May not reach remote communities.
- Technology and capacity to compile data may be limited.
- Census counts are unreliable several years after the census.

Organization and Structure of a Surveillance System

Components of a Surveillance System: 438

1- An overall organization:

Consisting of personnel, finances, logistics and administrative back up.

2- The originators of data:

This would include the sources of data, data collectors and data collecting mechanisms.

3- The transmission of data to the surveillance centre

With specification of the mode of transmission and frequency of such transmission.

4- Data management and analysis:

This includes manual/ computerized data files, and statistical analysis procedures.

5- The sensible interpretation or results:

Including their consolidation and preparation of reports.

6- A system of feedback of results:

To the originators of data and to those who are in a position to enforce preventive steps.

7- A system to **periodically evaluate** the surveillance system itself.

Steps in Establishing a Surveillance System

Step 1

Is it Justifiable to Establish a Surveillance System?

- Confirming if the disease is of public health importance and whether prevention/ control measures are available.

Step 2

Spell out the objectives of surveillance system

- The following issues should be addressed :
 - Clearly **specify the disease** (s) proposed to be brought under surveillance.
 - Specify : **Who** needs what information, for **what** purpose?
 - The **target population**
 - The **health problem**: e.g. whether only Acute MI or entire spectrum of IHD is to be put to surveillance?
- **Nature of control programmes**: e.g. if it is a rare disease or a disease moving towards eradication, a fine surveillance will be needed; on the other hand if it is a common disease, a crude surveillance would suffice.

Step 3

Specify the organization and structure of the surveillance ?

- At the planning stage, clear specifications should be made as to “who will do what, how, and will be responsible to whom”.

Steps in Establishing a Surveillance System

Step 4

Clearly define the disease(s) being considered for surveillance ?

- **Case definitions** should be accurately worked out after detailed consultation with experts.
- All those involved in the collection of data should be **well trained** in the use of these case definitions/ diagnostic methods.
- Case definitions/ diagnostic procedures should be **simple** enough so as to be understood and used by all those on which the system depends for reporting.

Case Definition: ★ 438

A set of uniform criteria used to define a disease for public health surveillance (possible, probable, confirmed).

- Enable public health officials to classify and count cases consistently across reporting areas.
- It is not intended to be used by healthcare providers for making a clinical diagnosis or determining how to meet an individual patient's health needs.
- Refer to standard definitions stated by WHO and CDC.
- Every year, case definitions are updated.



Example	Item	Description
Beginning of COVID-19 (2019-nCoV)	Suspected case	A person with acute respiratory illness (fever with cough and/or shortness of breath) AND and of the following: 1. A history of travel to China in the 14 days prior to the symptom onset. 2. A close physical contact in the past 14 days with a confirmed case of COVID
	Confirmed case	Suspected case with laboratory confirmation of 2019-nCoV infection
Smallpox	Probable case	A case that meets the clinical case definition that is not laboratory confirmed but has an epidemiological link to another confirmed or probable case.
	Confirmed case	case of smallpox that is laboratory confirmed.

Step 5

Specify the Details of Collection of Information

- Select the proper sources of data
- Specify the method of data collection & The forms that will be used
- What time/place of diagnosis will be entered
- What will be the frequency of reporting?
- Decide the method of transmission of reports
- Central Collection of Data

Steps in Establishing a Surveillance System

Step 6

The Organization and procedures of data Analysis

- **Simple display of data:** Data can be displayed through histograms/ bar diagrams/ line diagrams describing the data according to various characteristics of person, place and time.
- **Descriptive statistics:** Give the “Summary statistics” (Incidence rates / prevalence / proportions / Mean / Median) along with the measures of dispersion (SD) and the 95% confidence intervals.

Table - 2 : Distribution of cases according to place of residence

Disease :		Reporting period :			
Number of cases according to Villages					
Village - 1	Village - 2	Village - 3	Village - 4	Total	

Table - 1 : Distribution of cases according to age & sex

Disease :		Reporting period :				
Number of cases according to Villages						
Sex	Age Group (Years)					Total
	0 - 4	5 - 14	15 - 44	≥ 45		
Males						
Females						
Total						

Ann - 1 : Suggested form for weekly or monthly reporting from PHC or CHC to next higher health care level

Period covered by the report: From (date) _____ to (date) _____

Name and address of health facility: _____

Sl No	Name	Address	Age	Sex	Diagnosis	Level of diagnosis (primary, secondary, probable/confirmed)	Date of onset
1.							
2.							
3.							
4.							
5.							

Name: _____ Investigation: _____
Date: _____ Signature: _____

Step 7

Making Scientific interpretations out of the results

- Consider whether the apparent, statistically significant, increases or decreases in the disease incidence at a given place and time **represent true changes**.
- **False increase or decrease** may be due to: **False positive**
 - Improvement in diagnostic procedures
 - Duplicate reporting
 - Enhanced reporting (after a workshop) (implement new software)
 - Increase in population size (migration)

Step 8

Ensure proper feedback to all concerned

- Provide regular (usually monthly) feedback reports to all those who are in a position to take action on the surveillance data (as, secretaries and directors of health department as well as other department concerned with human development).

Step 9

Periodically evaluate / review the surveillance system

- Periodic evaluation is important to identify defects and reorient the methodology.
 - See whether the case definitions need a change?
 - Are there some problems in the timely and accurate reporting
 - How can it be improved?

Examples of National Surveillance Systems

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HESN

- **Health Electronic Surveillance Network (HESN)** is used to control and manage infectious diseases and epidemics online.
- It includes 7 modules: Work management, Investigations, outbreaks, inventory, admin, immunization and family health

HESN Dashboard



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ISSA

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- **Influenza Surveillance In Saudi Arabia (ISSA)**

Objectives:

- Objectives of influenza surveillance The goal of influenza surveillance is to minimize the impact of the disease by providing useful information to public health authorities, which will help in planning appropriate control and intervention measures, allocate health resources, and make case management recommendations.

Summary from doctor slides

- Surveillance is an important tool for public health.
- It is defined as an “Ongoing systematic collection, analysis, interpretation and dissemination of data.
- Regarding a health related event for use in public health.
- Action to reduce morbidity and mortality and to improve health.
- Routine surveillance data are available in regular reports by national and international sources all over the world.
- Three main types of Surveillance:
 - Passive (Common)
 - Active
 - Sentinel
- Main aim disease control and prevention.

Quiz

MCQ

1- You want to conduct a surveillance program system on “Nocardiosis”. You know that Nocardia infections are very rare in your country. Which type of surveillance system would you use?

- A- Passive surveillance
- B- Active surveillance
- C- Semi active surveillance
- D- Sentinel surveillance

2- “Measurements used to evaluate a certain program with constant adjustments done based on the results”. Which of the following terms best describe the statement?

- A- Reporting
- B- Surveillance
- C- Monitoring
- D- Adjusting

3- You decided to create a surveillance program that tests people for certain highly deadly genetic illness. Your supervisor told you that testing people born with a genetic illness is not a priority. Which of the following criterias **DOESN'T** apply to your proposed program?

- A- Severity
- B- Preventability
- C- Disability
- D- Fatality

4- Which of the following statements is true regarding case definition?

- A- Probable and suspected cases are distinct and can never overlap
- B- It is intended to be used by healthcare providers for making a clinical diagnosis or determining how to meet an individual patient's health needs
- C- A case of a patient who meets the clinical criteria is said to be a susceptible case. If the patient had contacted a confirmed case it is said to be probable.
- D- a case of a patient who meets the clinical criteria is said to be susceptible case. If the patients shows radiographic images suggestive of the case it is said to be confirmed

5- Which of the following describes a difference between survey and surveillance?

- A-Survey monitors long term trends whereas surveillance informs about patterns of disease occurrence
- B- Survey provides data for new cases of diseases whereas surveillance provides history of old and new cases of disease
- C- Survey is time consuming while surveillance is relatively quick
- D- Survey is a one time activity and surveillance is an ongoing collection of data

6-Which one of the following is an obstacle for obtaining high quality surveillance data?

- A- On time responsiveness
- B- Under reporting
- C- Use of active surveillance system
- D- Well-trained staff

Answers

Q1	Q2	Q3	Q4	Q5	Q6
B	C	B	C	D	B

Thank You and Good Luck

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