As part of an extensive evaluation of our infectious disease surveillance data in MAVEN, a Key Indicator Report was sent to all local health departments this month. These town specific reports highlight data on 36 reportable infectious disease case events from 2010 through 2012. The key indicators for each disease, detailed in the report, represent data elements that are crucial for public health surveillance and response. Tracking these indicators over time will allow both the MDPH epidemiology staff as well as local health departments to monitor how complete their case investigations are and set goals for improvement.

MDPH hosted three webinars to demonstrate how the reports can be downloaded via MAVEN, how to navigate through the different tables, and how the results should be interpreted. We have decided to use this month’s ePostcard to highlight some of the statewide report results as well as answer some frequently asked questions the ISIS help desk has received.

**Statewide highlights**

Statewide comparison data was included with each town-specific report. Overall, 80% of the immediate disease events reviewed had all key indicator variables answered. A little over half of the routine disease events had all key indicator variables answered.

**Source:** MDPH Key Indicator Report, November 2013

**Immediate Diseases:** GAS, HEPA, LIST, MEAS, MUMPS, NMEN, RUB, TB_ACTIVE, TUL

**Routine Diseases:** AMEB, BAB, CALI, CAMP, CHOL, CRYPT, CYCLO, EEE, EHR, ENCEP, ENTRO, GIAR, HFLU, HGA, HUS, LEG, LEP, MAL, PERT, RMSF, SAL, SHIG, SP, STEC, TRICH, WNI, YER
Frequently asked questions

1. Do I need to investigate old events that do not have all key indictors completed?
   Local health departments are not expected to go back and try to investigate old events. It may be helpful to review any events where key indicator variables are missing to see if the information may have been captured in the notes section. If so, you can transfer that data to the appropriate question package.

2. Why aren’t physician-reported diseases such as Lyme disease and Hepatitis C included?
   The MDPH surveillance evaluation group chose to focus on a limited set of immediate and routine diseases for this initial report roll out. These are diseases where the primary responsibility for investigation falls to the local health department or is a collaborative effort between the local health department and the MDPH Epidemiology and Immunization Program. Diseases where surveillance information is collected directly from physicians (including Lyme disease, Hepatitis B, Hepatitis C) will be included in a separate report to be disseminated at a later date.

3. Why aren’t sexually transmitted diseases included?
   The reports are meant to evaluate surveillance data captured in MAVEN, which currently does not include STDs.

4. Are the years in the report fiscal or calendar?
   Calendar years are used in the report.

Further information regarding the Key Indicator Reports, including how to access them via MAVEN is highlighted in the "Key Indicator Report Training Tool" in the MAVEN online help section.

If you have questions about the Key Indicator Reports or MAVEN in general, please email isishelp@state.ma.us or contact the MAVEN help desk at 617-983-6801.