



Illinois Disease Surveillance System (IDSS) Provider Portal

What is the Illinois Disease Surveillance System (IDSS)?

the system.

The Illinois Disease Surveillance System (IDSS) is a Salesforce (web-based) system built for local and state health department staff and health care providers to report and monitor communicable diseases within the state of Illinois. IDSS was designed to assist the Illinois Department of Public Health's (IDPH) and its stakeholder's ability to:

Monitor and manage communicable diseases as they are reported by enabling more complete and integrated data collection. Track tasks and manage workloads via automated processes and dashboards for LHDs and IDPH. **IDSS** Adapt and adjust to allow surveillance and investigation of emerging diseases for future needs. Track cases associated with outbreaks through greater outbreak functionality directly in



When will providers be able to use IDSS?

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The system will be implemented in two separate releases in 2024. Below provides a timeline for system implementation and when certain diseases will be implemented into IDSS.



Providers who report in the provider portal for multiple disease types will be accessing two systems until complete system implementation in Fall 2024. Beginning July 15, providers should use IDSS for STIs and TB, while continuing to use I-NEDSS to input all other diseases until Release 2.



What are some key features for providers in IDSS?

There are several IDSS key features, including user-friendly design, streamlined reporting, ability to update reports, and crossorganization visibility into lab results, relevant for providers.



Providers cannot save reports until full person, disease report, and lab results (if applicable) are input into the system. Once a preliminary provider report is saved, it is immediately accessible to LHDs.



What will the system look like? - Provider Portal Homepage

The Homepage in the Provider Portal offers quick access for providers to enter manual reports (e.g., STIs and TB lab reports for Release 1), provide updated information to saved disease reports, and view submitted disease reports.





What will the system look like? – Manual Intake (1 of 2)

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Providers use the manual intake function to input mandatory information, including demographic information, disease reports, and lab results. Once mandatory information is completed, the provider report will be immediately accessible to LHDs.

| ✓ Laboratory | | | |
|--|---|---|--|
| Performing Lab Q ✓ Ordering Facility | | | Entering information for a Disease Report in the Provider |
| Ordering Facility Name | Ordering Facility Address | | Manual Intake function |
| Ordering Facility Phone | Search Address | Q | |
| Ordering Facility Phone | Ordering Facility Address (Country/Territory) | | |
| ordering ruency mone | None | ▼ | During this process, providers |
| | Ordering Facility Address (Street) | | will enter mandatory information |
| | | h | on demographic information , |
| | Ordering Facility Address (City) | Ordering Facility Address (State/Province) | disease diagnosis, and lab |
| | | None 💌 | results and will have the option |
| | Ordering Facility Address (ZIP/Postal Code) | | to complete an accompanying |
| | | | questionnaire. |
| | Address Line 2 | | |
| | | | |
| | Ordering Facility County | | |
| | None | ▲ ▼ | |
| | | | |



What will the system look like? – Manual Intake (2 of 2)

The questionnaire portion of the Manual Intake process is completed after all mandatory information is input into the provider report. The questionnaire enables providers to enter additional, disease-specific information on the individual.

| Syphilis Diagnostics Syph | ilis Treatments Interview - Demographics Interview - Beh | avioral Interview - Testing & Coun | s Interview - Treatments |
|---|--|------------------------------------|---|
| Syphilis Diagnostics | | | |
| Syphilis Diagnostics Syphilis Diagnostics (0/2) Test Ordering Provider (0/3) Signs and Symptoms (0/1) Syphilis Manifestations (0/4) Comments (0/1) | Syphilis Diagnostics Specimen Source* Blood/Serum Cerebrospinal fluid (CSF) Cervix/Endocervix Lesion-Genital Luymph Node Aspirate Oropharynx Ophthalmia/Conjunctiva Other Test Ordering Provider | Clinical DiagnosisNone | The questionnaire portion of the Manual Intake process is a set of pages that contain disease specific questions for the report . Some questions include diagnostic information, epidemiologic factors, and treatment information. |
| | TitleNone Phone Type your answer here | Name Type your answer here | |
| | | | |

How will this impact my work?

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For next steps, providers should confirm access to the IDSS system. Beginning July 15, providers will begin manually reporting STI and TB in the IDSS provider portal and STI and TB ELRs will begin to automatically load into the system.

| Provider Access | Providers who have logged into I-NEDSS between December 2022 and April 2024 have received communications from <u>dph.idss@illinois.gov</u> and have been automatically uploaded as users into the new system. Providers who have not received an email will need to request access by emailing DPH.IDSS@illinois.gov. |
|--|--|
| Automatic Receipt of Hospital ELRs | Beginning July 15, as part of Release 1, ELRs sent by hospitals for chlamydia, gonorrhea, syphilis, congenital syphilis, Mpox, and tuberculosis will automatically be received into the new IDSS for local health departments to process. |
| Provider Reporting in IDSS | Beginning July 15, providers who manually report chlamydia, gonorrhea, syphilis, congenital syphilis, Mpox, and tuberculosis in the provider portal will do so in the new IDSS provider portal . |
| Continuing Use of IDSS | After Release 2 , provider reports related to all diseases and conditions will be submitted through the new IDSS provider portal . |



What resources will be available to help me use IDSS?

Training resources, including videos, guidance documents, and office hours will be available to providers to assist with providers' transition to using IDSS.

Training videos, guidance documents, and office hours will be available to providers in early July to assist with the transition to the new system.

