



Data Distribution Portal (DDP) Frequently Asked Questions (FAQs)

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Introduction

The Data Distribution Portal (DDP) is a web-based solution to help CalREDIE users access data exports and reports to manage state and locally reportable infectious disease and condition information for their organization. The DDP stands on a Data Warehouse that is populated nightly with CalREDIE data. The DDP allows CalREDIE users to either download their data in a user-friendly (flat file) format or view available reports.

Section I: General Questions

How does the DDP improve data and report management for Local Health Departments and CDPH program staff?

The first major improvement is performance. Due to the complex database design of the CalREDIE system, performance issues for large data sets (i.e. chlamydia) have historically plagued CalREDIE customers. The DDP resolves this issue by using a Data Warehouse designed for handling large sets of data. The Data Warehouse resides on its own servers with dedicated network resources. The DDP can return an entire years' worth of CMR data within 4 seconds. Although there have been upgrades to the CalREDIE system's export capability, downloading a similar export from the CalREDIE system may take longer than downloading a similar export from the DDP, or may "time out" due to the size of the export.

The second major improvement is report and export design and deployment. Reports can range from simple, static ("canned") reports with tabular information, to complex reports that combine data from multiple sources. The DDP can generate the report in a variety of formats, including the new Office formats for Word and Excel, as well as XML, PDF, TIFF, and MHTML. The DDP enhances data exports by combining data from





multiple tables into a flat file format available for export as a .tsv file which can be readily imported into a variety of statistical analysis programs, including Excel and SAS.

Section II: Authentication & Security Questions

How do I gain access to the DDP?

Access to the DDP is based on your CalREDIE permissions. The DDP uses the CalREDIE user database for authentication and password encryption. On a nightly basis, the DDP updates its login information to match the information in CalREDIE. Therefore, CalREDIE users only have to remember one username and password to access either CalREDIE or the Data Distribution Portal (DDP). For new CalREDIE customers please contact the CalREDIE Help Desk for more information.

What Data and Reports do I have access to?

The authorization of the DDP to download data or view reports is based on two main factors - the user's jurisdiction and assigned disease group(s). For example, a CaIREDIE user assigned to Placer County and the STD disease group would only have access to STD data and STD reports for Placer County.

Can I use the DDP if I don't have a CaIREDIE account?

No. The DDP uses the CalREDIE user database to authenticate.

Will my CalREDIE account information and the DDP ever be out of sync?

Yes. The DDP pulls CalREDIE account information on a nightly basis. If you change your password, jurisdiction or disease group in CalREDIE during the day, CalREDIE and the DDP will be out of sync until the next business day.

How Secure is the DDP?

CDPH has a very strict network architecture model that all web based applications must abide by. This includes the physical servers, protocols and ports, and requires all webbased traffic to be encrypted via https. The DDP is designed and written to meet the CDPH Application Architecture model

Another method utilized to protect the DDP is the implementation of an account lock out policy. This policy limits the user to five tries and then locks the account.

The DDP application audits user activity, to track and log what information a specific user is accessing.

Section III: Technical Requirement

What web browsers are supported?

CDPH recommends using Internet Explorer 8 or above.

Section IV: Data Questions

What data does the DDP contain?

The DDP allows access to data housed in the CDPH Data Warehouse. The CDPH Data Warehouse is populated nightly with CalREDIE data. It also contains limited historical





data sets for certain conditions (e.g. syphilis legacy data, chronic hepatitis C registry data) used in the generation of certain reports available through the DDP.

What data elements does the data extract contain? For System Tab data exports:

The data exports contain all data elements from the Confidential Morbidity Report (CMR) forms, also known as System Tabs (aka: Patient and Case Investigation tabs), in CaIREDIE. In addition, electronic lab report (ELR) data received in the system lab section (location on the Lab tab) of CaIREDIE are available for export, as well as system contact data.

For UDF data exports:

The data exports contain all data elements from the CMR forms and the User-Defined Forms (UDFs - Clinical, Lab and Epidemiologic tabs).

For Outbreak exports:

Several outbreak exports are now available in the DDP, including STD OBs (Chlamydia, Gonorrhea and Syphilis); GI Foodborne; GI Other/Unknown; Fever, NOS; Hepatitis/Jaundice; Neurologic (Meningitis/Encephalitis); Rash; Respiratory, non-TB; Sepsis/Bacteremia; Skin/Soft Tissue; Other/Unknown; and PHEP OB.

What file extension is used for downloaded data?

Downloaded files use the Tab Separated Values (.tsv)

Why was the file extension (.tsv) used for the exports?

The .tsv file extension is the most flexible to handle applications with open text fields.

Section V: Report Questions

Are there any current reports in the DDP?

Yes. There are several reports available in the DDP, including the STD Field Record, Syphilis Summary, Open Field Records, Open Interview Records, Early Syphilis Missing Interview Record, Congenital Syphilis Issues, Early Syphilis Cases Awaiting State Review, Hepatitis C Registry, ELR Auto-Import and Jurisdiction Counts by Month/Quarter. As is the case for all exports and reports available for CaIREDIE users, your access is based on your assigned jurisdiction and disease group.

Are there plans to include more reports?

Yes. CDPH is currently working with various stakeholders to identify and develop additional reports.

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