Provincial Training Manual
for
Healthcare Associated Infections (HAIs):
Clostridium difficile
and
Methicillin resistant Staphylococcus aureus
Logging in:

- Double click the HAI Database icon on your desktop
- Type your Name and Password in the Logon screen, click [OK]
Open the Database:

- The Main Switchboard will automatically display
- Select [CDI] or [MRSA], according to the type of data you are entering
Enter the Data

**CDI Surveillance Form:**

- The CDI Surveillance Form will display, by default you are brought to an empty record.
- Enter the appropriate data on the [Patient Information] tab, according to the HAI Protocol (see data definitions below).
- The salmon-coloured fields are required for the reports to run and are mandatory to complete.

- Navigate through the data entry pages by clicking on the tabs in the Surveillance Form; Select the [CDI History] tab to move to the next screen.
- Select the [CDI Outcome] tab to move to the last screen

When data entry is complete, select [Save & Close] to save the record and close the Surveillance Form

If you wish to add information to a previously entered form, display the record (see the section on Finding a record), enter the new information and select [Save & Close]

Note: Updates and changes are final

If you are viewing a record but wish to enter information for a new case, select [Add Record] to be brought to a blank screen (the previous screen will close)
CDI Definitions:

**Chart #**
Chart number for those facilities that use a chart number as a patient identifier.

**Clostridium difficile associated diarrhea (CDI) case**
Laboratory confirmation (positive toxin or culture with evidence of toxin production).

**Comments**
For personal use; not for entry into the database.

**Date of Admission**
Please enter Day (##), Month (May) and Year (2008) in this order.

**Date of Birth**
Please enter Day (##), Month (May) and Year (2008) in this order.

**Date of current positive lab test**
What was the date of this patient’s newly identified CDI culture?

Please enter Day (##), Month (May) and Year (2008) in this order, for the **most recent** diagnosed episode of CDI.

**Date of Discharge**
Please enter Day (##), Month (May) and Year (2008) in this order.

Not applicable if person is LTC resident.

**Episode**
The time from the start of the symptoms until the symptoms resolve.
<table>
<thead>
<tr>
<th>Facility</th>
<th>Name of hospital or long term care facility where patient resided when the positive culture was identified</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has this patient ever had CDI before?</td>
<td>Assess if the person has had previous testing for CDI and determine if this is a recurrence of CDI or a reinfection.</td>
</tr>
<tr>
<td>ICU admission required for this episode?</td>
<td>Did the patient require an ICU admission due to CDI?</td>
</tr>
<tr>
<td>MCP #</td>
<td>MCP Number</td>
</tr>
<tr>
<td>Patient disposition at 30 days after diagnosis</td>
<td>At 30 days post CDI diagnosis, where was the person?</td>
</tr>
<tr>
<td>PCU in Facility</td>
<td>Name of patient care unit of facility (i.e. ICU, 3B).</td>
</tr>
<tr>
<td>Reason for Admission</td>
<td>Why is the person in the facility?</td>
</tr>
<tr>
<td>Recurrent CDI</td>
<td>A case as defined above with recurrence of diarrhea within 2 months of a previous <em>C difficile</em> infection episode.</td>
</tr>
<tr>
<td>Reinfection</td>
<td>A case as defined above whose symptoms started greater than 2 months from a previous <em>C difficile</em> infection.</td>
</tr>
<tr>
<td>Sex</td>
<td>Select male or female gender, as appropriate</td>
</tr>
<tr>
<td>Treatment for CDI</td>
<td>What antibiotics were prescribed for CDI? How many courses of the antibiotic were required to treat the person?</td>
</tr>
</tbody>
</table>
| | $x_1 = \text{one course of antibiotic}$; $x_2 = \text{two courses of antibiotic}$;  
| | Other; specify: indicate the type of antibiotic used and if one, two or more courses were required. |
| Type of Care | Acute Care facility, LTC facility, or other |
| Type of patient care unit | If the patient was in a facility when laboratory confirmation was known, indicate the type of service The ICP should use best judgment to determine to which unit the transmission is associated. |
Where was the CDI acquired?

Please select the most appropriate option.

**Nosocomially-acquired CDI**

Symptoms occur at least 72 hours or more after the current admission or symptoms cause readmission in a patient who had been hospitalized within the previous two months of the current admission.

**Long Term Care acquired**

Symptoms occur at least 72 hours after the admission and the resident has not had a hospital admission within the last two months.

**Healthcare associated**

Refers to infections that occur as a result of contact with the health care system for care provided in any of the following locations:
- emergency room
- ambulatory clinics
- personal care homes
- doctor’s office
- nursing clinics
- in the home within 2 months of the diagnosis of CDI

**Community associated**

The patient has not had any contact with the health care system within the past two months.

**Unknown**

A patient does not fit any of the above criteria.

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Why was this specimen collected?

Identify the reason for the CDI testing.

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**MRSA Surveillance Form:**

- Follow the same procedure as CDI Surveillance Form, this time there are four tabs for which to enter information
- Again, the salmon-coloured fields are mandatory
# MRSA Definitions:

**At which sites have the MRSA been isolated?**

At which site has MRSA positive culture been obtained? Check the boxes in the culture positive column for each site that MRSA has been isolated. In the second column, identify whether the positive culture represented an infection or colonization.

**Infection**

MRSA infection is determined by the presence of signs and symptoms associated with MRSA infections.

**Colonization**

MRSA colonization is determined by the presence of MRSA on the skin, soft tissue, nose or other which are not showing clinical signs and symptoms of infection.

If the person is found to be colonized from one site and infected at another site, the person would be considered an infected case.

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**Chart #**

Chart number for those facilities that use a chart number as a patient identifier

**Comments**

For personal use; not for entry into the database.

**Date of Admission**

Please enter Day (##), Month (May) and Year (2008) in this order.

**Date of Birth**

Please enter Day (##), Month (May) and Year (2008) in this order.

**Date of Discharge**

Please enter Day (##), Month (May) and Year (2008) in this order.

Not applicable if person is LTC resident.

**Date of MRSA culture**

What was the date of this patient’s newly identified MRSA culture?

Please enter Day (##), Month (May) and Year (2008) in this order, for the **most recent** diagnosed MRSA culture.

**Episode**

The time from the start of the symptoms until the symptoms resolve.

**Facility**

Name of hospital or long term care facility where patient resided when the positive culture was identified

**Is there an epidemiological link?**

This refers to MRSA thought to be epidemiologically linked to another person with MRSA in your facility (e.g. common exposures, shared rooms, contact with implicated health care worker, and contact with another person with MRSA).

Using your best judgment, identify whether an epidemiological link has been established between this person and any other known MRSA person in your facility.
| MCP #      | MCP Number
|------------|-------------
| Methicillin resistant *Staphylococcus aureus* case | Laboratory reported positive case of MRSA identified for the first time. Cases previously identified at this or another facility are not included.
| Patient disposition at 30 days after diagnosis | At 30 days post CDI diagnosis, where was the person?
| PCU in Facility | Name of patient care unit of facility (i.e. ICU, 3B).
| Reason for Admission | Why is the person in the facility?
| Sex | Select male or female gender, as appropriate
| Treatment for MRSA | Was an antibiotic prescribed for the MRSA diagnosis? If yes, which antibiotic?
| Type of Care | Acute Care facility, LTC facility, or other
| Type of patient care unit | If the patient was in a facility when laboratory confirmation was known, indicate the type of service. The ICP should use best judgment to determine to which unit the transmission is associated.
| Where was the MRSA acquired? | Please select the most appropriate option.

- **Nosocomial-acquired infected case**
  - The case must have developed symptoms at least 72 hours or more after the current admission.

- **Nosocomial-acquired colonized case**
  - The case was identified as part of a screening endeavor 72 hours or more after the patient was admitted to the facility.

- **Long Term Care acquired infected case**
  - The case must have developed symptoms at least 72 hours or more after the resident was admitted to the facility and the resident was not a patient in the hospital during the past 12 months.

- **Long Term Care acquired colonized case**
  - The case must have been identified 72 hours or more after the resident was admitted to the facility as part of a screening endeavor and the resident was not a patient in the hospital in the past 12 months.

- **Healthcare associated**
  - Refers to infections that occur as a result of contact with the health care system for care provided in any of the following locations:
    - emergency room
    - ambulatory clinics
    - personal care homes
    - doctor’s office
    - nursing clinics
    - in the home within the past 12 months
No established health-care associated risk factors, and:
- Hospitalized <72 hours
- No previous history of MRSA
- No medical devices such as urinary catheters, I/V lines, feeding tubes, tracheostomy, dialysis access, etc.
- No history of hospitalization, surgery, or dialysis within 1 year of MRSA culture
- Not in residence at a LTC facility within 1 year of MRSA culture

**Why was the first culture done?**

Please select the most appropriate option.

**Admission screen**

This culture was done as part of a protocol on admission that requires patients to be screened for MRSA.

**Clinical isolate**

These cultures were a result of some clinical indication or suspicion of infection.

**Contact screening**

The screening was done due to the patient/resident being in the room, ward or unit of a recently identified positive case.

**Other screen**

These cultures were taken in the course of working-up an outbreak or cluster, prevalence screen or other screening for MRSA. These cultures would not have been done routinely.
Find a Record:

- Both the CDI and MRSA Surveillance Forms have a [Find Record] button; select it to search for a previously entered record

You will be brought to the Find Record screen where you can then search by the displayed fields

- Enter your search criteria; Click [Search] to search through the records
- Clicking the field name once will display the entries in ascending order; pressing the field name a second time will display the entries in descending order.
- Select the glasses key on the right-hand side to view the entire record.

<table>
<thead>
<tr>
<th>MCP #</th>
<th>Sex</th>
<th>Date of Lab Test</th>
<th>Acquired:</th>
<th>Treated:</th>
</tr>
</thead>
<tbody>
<tr>
<td>21030104011</td>
<td>Female</td>
<td>10-Nov-2008</td>
<td>AC - Western Memorial Regional Hospital</td>
<td>AC - Western Memorial Regional Hospital</td>
</tr>
<tr>
<td>356-25-699-301</td>
<td>Female</td>
<td>15-Nov-2008</td>
<td>AC - Dr. Charles L. Leggott Health Centre (AC)</td>
<td>AC - Dr. Charles L. Leggott Health Centre (AC)</td>
</tr>
<tr>
<td>457-900-239-091</td>
<td>Female</td>
<td>10-Jul-2009</td>
<td>AC - Bonnie Ben Health Centre (CWO)</td>
<td>AC - Bonnie Ben Health Centre (CWO)</td>
</tr>
</tbody>
</table>
Delete a Record:

- Both the CDI and MRSA Surveillance Forms have a [Delete Record] button; select it to delete the record you are currently viewing.
- A prompt will ask if you are sure you wish to delete the record, select [Yes] if you wish to continue; select [No] if you wish to keep the record and continue in the Surveillance form.

- Please note: Updates and changes are final.
Enter Meditech Data:

- You must enter the information from the Meditech system so that the reports will run correctly
- On the Main Switchboard, select Meditech

- Select the Month and Year for which you wish to enter information
There is a list of the facilities in your region; enter the Client Care Days and Number of Admissions, as appropriate (see HAI Definitions in the above section for a description of these fields)
Click [Save & Close] when you are finished entering the data
You will be brought back to the Main Switchboard
At the Main Switchboard, select [Reports]

- There are two types of reports: summary and detailed.

**Summary Reports:**
- Select [Summary]

Select the report type you wish to produce (CDI or MRSA) and then select the desired dates.

Note: You can produce quarterly reports by selecting 3 months at a time.
Select [Preview Report] to be brought to the Report Screen.  
Note: You can print this if you wish to have a copy. 
Select File, then Print.
1. Numerator Data

### Acute Care

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Infection</th>
<th>Re infiltrate</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. M. Gay Memorial Health Centre (AC)</td>
<td>1</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td><strong>Total:</strong></td>
<td><strong>1</strong></td>
<td><strong>0</strong></td>
<td><strong>1</strong></td>
</tr>
</tbody>
</table>

### Long Term Care

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Infection</th>
<th>Re infiltrate</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. M. Gay Memorial Health Centre (TC)</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total:</strong></td>
<td><strong>1</strong></td>
<td><strong>0</strong></td>
<td><strong>1</strong></td>
</tr>
</tbody>
</table>

2. Denominator Data

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Patient Care Days</th>
<th>Admissions</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. M. Gay Memorial Health Centre (AC)</td>
<td>122</td>
<td>0</td>
</tr>
<tr>
<td>Blue River Provincial Health Centre (AC)</td>
<td>217</td>
<td>0</td>
</tr>
<tr>
<td>Brantford Regional Health Care Centre (AC)</td>
<td>372</td>
<td>0</td>
</tr>
<tr>
<td>Captain William J. Gordon Memorial Hospital (AC)</td>
<td>400</td>
<td>0</td>
</tr>
<tr>
<td>Central Local Health Region (AC)</td>
<td>199</td>
<td>0</td>
</tr>
<tr>
<td>Chateauguay Regional Health Care Centre</td>
<td>399</td>
<td>0</td>
</tr>
<tr>
<td>Eau Claire Health Centre (AC)</td>
<td>134</td>
<td>0</td>
</tr>
<tr>
<td>Green Bay Health Centre (AC)</td>
<td>245</td>
<td>0</td>
</tr>
<tr>
<td>James Paton Memorial Health Care Centre</td>
<td>2795</td>
<td>0</td>
</tr>
<tr>
<td>Labrador Health Care Centre</td>
<td>780</td>
<td>0</td>
</tr>
<tr>
<td>Nain Dimms Bay Memorial Health Care Centre (AC)</td>
<td>527</td>
<td>0</td>
</tr>
</tbody>
</table>

**Send the Report to the Province:**

- To send the HAI report to the province, select the report type you wish to produce (CDI or MRSA) and then select the desired dates
- Select [Save Report]
The file will automatically encrypt and save two files to your desktop
At the prompt; select [OK]

Attach the zip file to your email in the same way that you would any other attachment
(NOTE: The icon may look different on your computer.)

Send one report to kellybutt@gov.nl.ca and marionyetman@gov.nl.ca
Send the other report to your MOH
Note: Once attachment has been sent, you can delete the file from your computer.

**Detailed Reports:**

At the Main Switchboard, select [Reports]
Select [Detailed]

Select the report type you wish to produce (CDI or MRSA) and then select the desired dates.
Select [Preview Report] to view the detailed report
Pivot Charts:
- At the Main Switchboard, select [Reports]

Summary Pivot Charts:
- Select [Summary Pivot Charts]

Choose the type of chart you would like to view. You may only select to view one summary chart at a time
- Select [Preview Chart]
- Enter the numeric value of the month (i.e. January = 1, February = 2, etc.)
- Do not enter spaces between the comma and the number
- Note: Quarterly charts may be viewed by selecting three consecutive months (i.e. the first quarter would be: 1,2,3)
- Select [Okay]

- Enter the year(s) for which you would like to view the
- Do not enter spaces between the comma and the number
- Note you may select multiple years to view comparisons of the same time frame over multiple years

- Select [Okay]; you will see the pivot chart for your selection
- Note: You can alter the month selection by clicking on the down arrow by \([\text{mnth}]\) and unselecting the months you do not want. You can add these back later if you require.
- You can do the same for the years by clicking on the down arrow by \([\text{Yr}]\)

- When are finished, close the pivot chart by selecting the red X in the top right corner
- Select [No] when you are asked if you would like to save the changes

![Microsoft Office Access dialog box](image)

**Detailed Pivot Charts:**
- Detailed Pivot Charts will provide the same information as Summary Pivot Charts with the added detail of hospital-level data
- Select [Detailed Summary Pivot Charts]

- Choose the type of chart you would like to view. You may only select to view one summary chart at a time
- Select [Preview Chart]
- Enter the numeric value of the month (i.e. January = 1, February = 2, etc.)
- Do not enter spaces between the comma and the number
- Note: Quarterly charts may be viewed by selecting three consecutive months (i.e. the first quarter would be: 1,2,3)
- Select [Okay]

- Select [Okay]; you will see the pivot chart for your selection
- Note: You can alter the month selection by clicking on the down arrow by [mnth] and unselecting the months you do not want. You can add these back later if you require.
- You can do the same for the years by clicking on the down arrow by [Yr]
- You can do the same for the Hospital years by clicking on the down arrow by [Hospital]
- When are finished, close the pivot chart by selecting the red X in the top right corner
- Select [No] when you are asked if you would like to save the changes
Administration:

- Select the [Administration] button from the Main Switchboard
- Note: Not all users will have access to this function

Select [Culture Locations]

Change Culture Locations:

- Note: Not all users will have access to this function
- To add a new culture location, enter the new location name in the blank box at bottom of the list; make sure the check box is selected (activated)
- This will update the drop down list in the MRSA culture location field
- To remove a culture location from the MRSA culture location field, DO NOT delete the name of the culture location
- Simply unselect (deactivate) the box beside the culture location
- Select [Save & Close]

- Change Hospital Locations:
  - Note: Not all users will have access to this function
  - Select the [Administration] button from the Main Switchboard

- Select [Hospitals]
To add a new Hospital location, enter the new location name in the blank box at bottom of the list
Select the Type of Facility by choosing from the options in the drop down menu beside the name of the Facility
Make sure the check box is selected (activated)
This will update the drop down list in the CDAD and MRSA facility field
To remove a Hospital location from the CDAD and MRSA facility field, DO NOT delete the name of the Hospital location
- Simply unselect (deactivate) the box beside the hospital location
- Select [Save & Close]

**Change Password:**
- Select the [Administration] button from the Main Switchboard
- Select Change Password

- Follow the instructions of the screen; select [Change]
Security:

- Select the [Administration] button from the Main Switchboard

- Select [Security]
Create a User

- To create a username and password, select [Create User]

- Fill in the appropriate information.
- The PID is a unique numerical value required by access in order to create a new user. This number does not have to be remembered and will not be used again.
Add a User to a Group:
- Each user must be added to a User Group. This is what determines the security settings for a particular user
- Select the User Name from the drop down list
- Select the appropriate security group from the Group Name drop down list (see below for descriptions of security access for each group)

Admin
Administrative rights to the Microsoft Access workgroup file (required to add users to the workgroup and assign users to groups)

HAI Admin
Administrative rights to the HAI database (required to change permissions on objects)

Lead
Permissions to modify lookup tables (ie. hospitals and culture locations) and modify structure of all objects

Data users (aka “normal”)
Permissions to use the application, but no administrative access

- Select [Attach User] to add the user to the group

Activate/Deactivate a user:
- Once a new user is created and added to a user group, the new user must be activated
- Select the user from the drop down menu; select [Activate User] to activate the user and allow them to access the HAI Database
- A user may be deactivated if they will not have access to the system for a specified amount of the time
- Select the user from the drop down menu; select [Deactivate User] to deactivate the user and remove access to the HAI Database
- NOTE: A deactivated user must be reactivated before they can access the HAI Database again

**Delete a User:**
- A user may be deleted if they will no longer require access to the system (permanently)
- Select the user from the drop down menu; select [Delete User] to delete the user
- The user will no longer have access to the system
- NOTE: This will not affect any data that the user previously entered
Questions or Concerns:

For help or information regarding TECHNICAL DIFFICULTIES, please contact your regional IT Support, or:

Kelly Butt
Provincial Epidemiologist
Public Health Division
1st Floor, West Block, Confederation Building
P.O. Box 8700
St. John’s, NL A1B 4J6

Phone: (709) 729-3209
Fax: (709) 729-0730
E-mail: kellybutt@gov.nl.ca

For help or information regarding DATA ENTRY or the SURVEILLANCE PROTOCOL, please contact:

Marion Yetman
Infection Control Nurse Specialist
Public Health Division
1st Floor, West Block, Confederation Building
P.O. Box 8700
St. John’s, NL A1B 4J6

Phone: (709) 729-3427
Fax: (709) 729-0730
E-mail: marionyetman@gov.nl.ca
Frequently Asked Questions:

1. **THE ZIP FILE ON MY HAI DISK WILL NOT OPEN.**
   
   The version of WinZip that you are using may not be the latest version. Please talk to your regional IT support to download the latest version online.

2. **WHAT ARE THE RULES FOR CREATING A NEW PASSWORD?**
   
   When you log on for the first time you will be prompted to change your password. You must select something 8 characters in length, and contain one number, one lower case letter, and one upper case letter.

3. **I FORGOT MY PASSWORD.**
   
   Please contact your regional IT support to create a new account. This will not affect any data that you previously entered.

4. **MY MOH FORGOT THEIR PASSWORD.**
   
   The MOH password is in the zip file on the regional HAI CD.

5. **WHAT IS THE PASSWORD FOR THE HAI CD?**
   
   Please contact Marion Yetman or Kelly Butt for this password.

6. **CAN I EMAIL A PASSWORD?**
   
   To ensure the highest standard of data safety, passwords must be sent via a different medium than that of the item that requires the password. For example, if a encrypted file is sent via email than the password may be sent via fax, general mail, or may be told verbally.

7. **THE DATA USERS CANNOT CHANGE THEIR PASSWORD.**
   
   This is an identified problem that only affects Data Users. All IT folks should have received instructions for this fix. Please contact Marion Yetman or Kelly Butt if you need the instructions to be re-sent.

8. **HOW OFTEN DO I SEND THE REPORTS TO THE PROVINCE?**
   
   Please contact Marion Yetman for this information.
9. WHAT REPORTS DO I SEND TO THE PROVINCE?

You only need to send the Summary Report to the province. The Detailed Reports and Pivot Table options are for regional use.

10. WHAT DO I DO WITH THE ZIP FILE ON MY DESKTOP ONCE I HAVE SENT IT TO THE MOH / PROVINCIAL OFFICE?

Once you have sent the appropriate files to the MOH and Provincial Office, you may delete the zipped files from your desktop. There is no need to keep these files or to back them up.

11. THE MOH CANNOT FORWARD THE UNZIPPED ATTACHMENT.

To ensure confidentiality, the zipped files are not intended for broad distribution. Please use the data in the detailed reports and pivot table options to produce regional reports for broad distribution.

User Access

12. WHY ARE THERE DIFFERENT USER TYPES WHEN LOGGING IN TO THE SYSTEM?

<table>
<thead>
<tr>
<th>User Type</th>
<th>Permissions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admin</td>
<td>Administrative rights to the Microsoft Access workgroup file (required to add users to the workgroup and assign users to groups)</td>
</tr>
<tr>
<td>HAI Admin</td>
<td>Administrative rights to the HAI database (required to change permissions on objects)</td>
</tr>
<tr>
<td>Lead</td>
<td>Permissions to modify lookup tables (ie. hospitals and culture locations) and modify structure of all objects</td>
</tr>
<tr>
<td>Data users (aka “normal”)</td>
<td>Permissions to use the application, but no administrative access</td>
</tr>
</tbody>
</table>

13. CAN MULTIPLE USERS USE THE DATABASE AT THE SAME TIME?

This should not be a problem. If you do encounter a database issue, please contact your regional IT support or Kelly Butt / Marion Yetman at the provincial office.

14. Should I ‘Delete’ or ‘Deactivate’ users that are no longer using the HAI Database?

This is up to you. Deleting the user has no adverse affect on the system.

Data Entry

15. HOW LONG DO I HAVE TO UPDATE A CLIENT RECORD?

There are no limits or restrictions to updating client records.

16. HOW WILL I ENTER THE MEDITECH INFORMATION INTO THE SYSTEM AT THE END OF THE YEAR?
The system will automatically update and insert the current year into the Meditech drop down box.

**IT Support**

17. **WHAT VERSION OF MICROSOFT ACCESS WAS USED TO CREATE THE HAI DATABASE?**

The database was created using Microsoft Access 2003. Please contact your regional technical support if you are unsure of the version on your computer.

18. **WHO DO I CONTACT FOR HELP?**

For any requests dealing with the entry of data, Marion Yetman from the Department of Health and Community Services should be contacted. For any requests dealing with the training or use of the application, Kelly Butt from the Department of Health should be contacted. For all other requests, including maintenance, back-ups, recovery, and enhancements, the regional staff will be responsible.

The OCIO has worked diligently to make sure the features required by the Government of Newfoundland and Labrador have been met, but because there is no network infrastructure connecting the Government of Newfoundland and Labrador’s network to the health regions, the OCIO is unable to perform maintenance or upgrades within the regions. The OCIO can provide historical information on the application.

19. **WHO IS RESPONSIBLE FOR DATA BACK-UP AND RECOVERY PLANS?**

As this will be housed in the regions, the province is not responsible for data back-up or recovery plans. This will be the responsibility of tech support out in the regions as we have no access to their database.

20. **WHO IS RESPONSIBLE FOR ONGOING MAINTENANCE OR ENHANCEMENT REQUIREMENTS?**

As this will be housed in the regions, the province is not responsible for data back-up or recovery plans. This will be the responsibility of tech support out in the regions as we have no access to their database.

**Miscellaneous**

21. **WHY CAN’T I USE THE MOUSE BUTTON TO SCROLL?**

The mouse wheel in Microsoft Access 2003 allows the user to scroll among records. This can create a problem if the user unknowingly scrolls into an old record while entering new data. The scrolling mouse feature has been disabled in the HAI database to ensure data quality.

22. **WHAT IS A PIVOT TABLE?**
A pivot table is a query that displays the HAI data in an interactive plot chart view. The user can then manipulate the viewing options, as needed to produce charts that are beneficial and specific to the regional needs.

23. HOW CAN I COPY MY PIVOT CHART INTO ANOTHER DOCUMENT (POWERPOINT, WORD, PDF, ETC)?

Unfortunately Microsoft Access 2003 does not have the capability to copy and paste a pivot chart. There are two alternate solutions:

1. Select [Print Screen], paste into the Paint program. You can adjust the picture here and paste into another document.  
   NOTE: If you maximize the pivot chart window before you select [Print Screen], the quality of the image will be better.

2. Save the pivot chart as a pdf (you may need your IT support to install this feature on your computer). You can import this pdf into another document.  
   NOTE: You may wish to adjust your [Page Setup] options before saving as a pdf.