

## Building the Bridge: The Digital Intersection of Healthcare and Public Health Meeting Executive Summary

On June 14, 2016, The Robert Wood Johnson Foundation (RWJF), in collaboration with the Public Health Informatics Institute (PHII) and Deloitte Consulting, brought together key members of the Public Health community, Electronic Health Records vendors, and Health Care Delivery Systems in a Deloitte Greenhouse facility in Chicago. The objectives of the meeting were:

1. To establish a common vision for interchange of actionable information between public health and health care
2. To agree that electronic case reporting, or eCR, is an initial opportunity to test this vision
3. To plan a set of live proofs of concept of electronic case reporting to begin during the first quarter of 2017
4. To establish governance for the proof of concept process with the intent that, once refined through experience, that governance will address broader aspects of data sharing between healthcare and public health over time

The Greenhouse achieved all of these objectives and more. There was agreement that interim governance should be initiated within the next 6 weeks, and the governance entity would be comprised of members from the three stakeholder communities. All parties agreed that eCR was the appropriate first step toward the agreed longer term vision. There was also general agreement that a new entity, a public-private organization that most closely would resemble a public authority or utility, could be established to maintain the surveillance efforts going forward. Further, the governance body established to oversee the proofs of concept would, it was agreed, evolve into the governance body for this new entity.

Beyond these mutual agreements, each of the stakeholder communities made a series of explicit commitments to each other.

Public Health committed to:

- Develop common trigger codes and a deployable tool that would be used by the vendor and delivery system communities to report cases of reportable conditions to jurisdictions in an automated way
- Subscribe to common technical standards for the delivery of electronic case reports
- Advocate for needed policy and regulatory changes that would enable eCR and digital surveillance

Electronic Health Records vendors committed to:

- Work together to develop a common technical standards and solutions for eCR and to enhance those standards and solutions over time as progress is made toward the long term vision
- Provide that work in kind to the public health and delivery system communities

Delivery System participants committed to:

- Participate in proofs of concept
- Do in kind work on their EHR systems to enable the data transmission needed for the proofs of concept

In the case of the EHR vendor and Delivery System participants, they will validate their commitments with senior organizational leadership.

The Robert Wood Johnson Foundation committed to supporting this work through the phase of developing and implementing shared governance and to assist in securing the funding needed to support the proofs of concept through to completion. Representatives from CDC also committed to seeking funding sources to support the latter. PHII committed to developing a project plan and project management through the eCR proofs of concept.

In a further exercise, participants placed key tasks that would culminate in successful eCR on a timeline that extended from the date of the Greenhouse to 1/1/18, when Delivery System participants stated that Meaningful Use objectives will include electronic case reporting. Given the short time frame, all participants agreed that many of these tasks must occur during the first 6 months of the time line. It was also noted that it will be necessary to develop a reference implementation for delivery systems to transmit to should their public health jurisdiction(s) be unprepared to accept eCR by the due date of 1/1/18.

At the conclusion of the session, participants were asked about their level of confidence that the objectives of the eCR proof of concept could be accomplished, on time. The level of confidence was high amongst all participants. Public health participants further acknowledged that the work of the session had changed their perception of the achievability of the objective of eCR.