

State and Local Leadership in electronic Case Reporting (eCR)

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STATE LEADERSHIP IN ELECTRONIC CASE REPORTING

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Improvements in Public Health Practice

- Efficiency and Productivity
- Quality Assurance
- Opportunity to Enhance Surveillance
- Governance
- Leadership

Efficiency and Productivity

- Reduced paper-based reports
- Automated, secure reporting
- More complete reporting
- Reduced data collection burden



Quality Assurance

- Manual data entry is time-consuming and introduces more opportunities for errors
- Automated integration with electronic disease surveillance systems reduces data entry errors
- Confirmation messages will help to assure providers cases were reported as required by law
- Original electronic messages can be retained for audit purposes or to respond to e-discovery requests



Future Potential to Enhance Surveillance

- Technological approaches and infrastructure may be applicable to other types of surveillance:
 - Chronic diseases
 - Risk factors
 - Utilization of clinical preventive services
- Conditions not mandated could be reported without identifying data elements

Governance

- Transition from informal to formal processes
- Need shared understanding of governance
- Develop a mission and vision then communicate it with passion
- Establish a plan for financial stewardship
- Create a risk management structure
- Decide on Board management policies and procedures

Build it and they will come?

- Not necessarily...
- Requires leadership
- Implementation requires substantial investment
 - Public health
 - EHR vendors
 - Providers
 - Other stakeholders
- Benefits need to be articulated to get buy-in



LOCAL LEADERSHIP IN ELECTRONIC CASE REPORTING

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Local Health Department (LHD) Perspective

- Share and acknowledge current informatics capacity at LHD
 - Progress with health information exchange
 - Barriers to further progress
- Describe local health department needs
 - Challenges to information exchange
- eCR sustainability and role of LHDs
- Resources to support state and local health departments

Context

Since 2011, meaningful use payments (for adopting and implementing certified EHR technology):

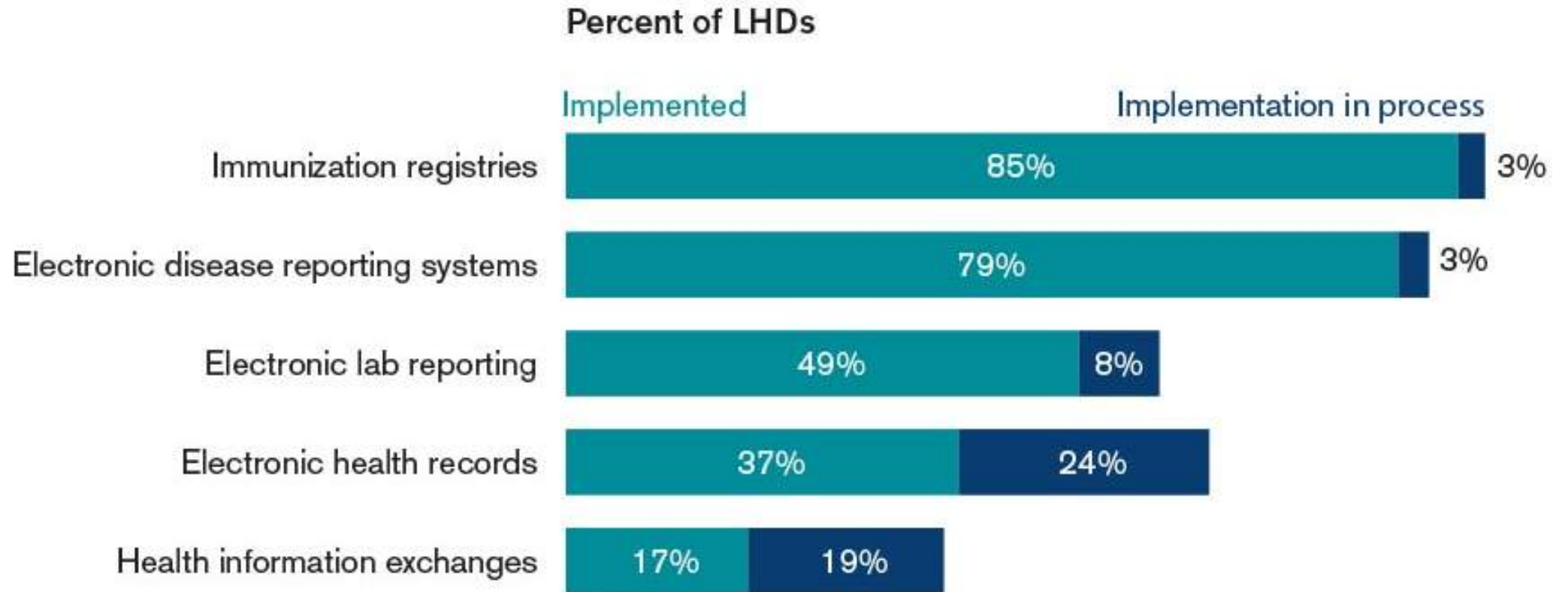
- >500,000 providers
- ~ 5000 hospitals
- Payments distributed: > \$35,000,000,000
- Total US population: 324,000,000

-
- **>\$ 100 per capita for every county and state!**
 - Annual state public health spending per capita: \$69- \$186*

Enormous opportunity

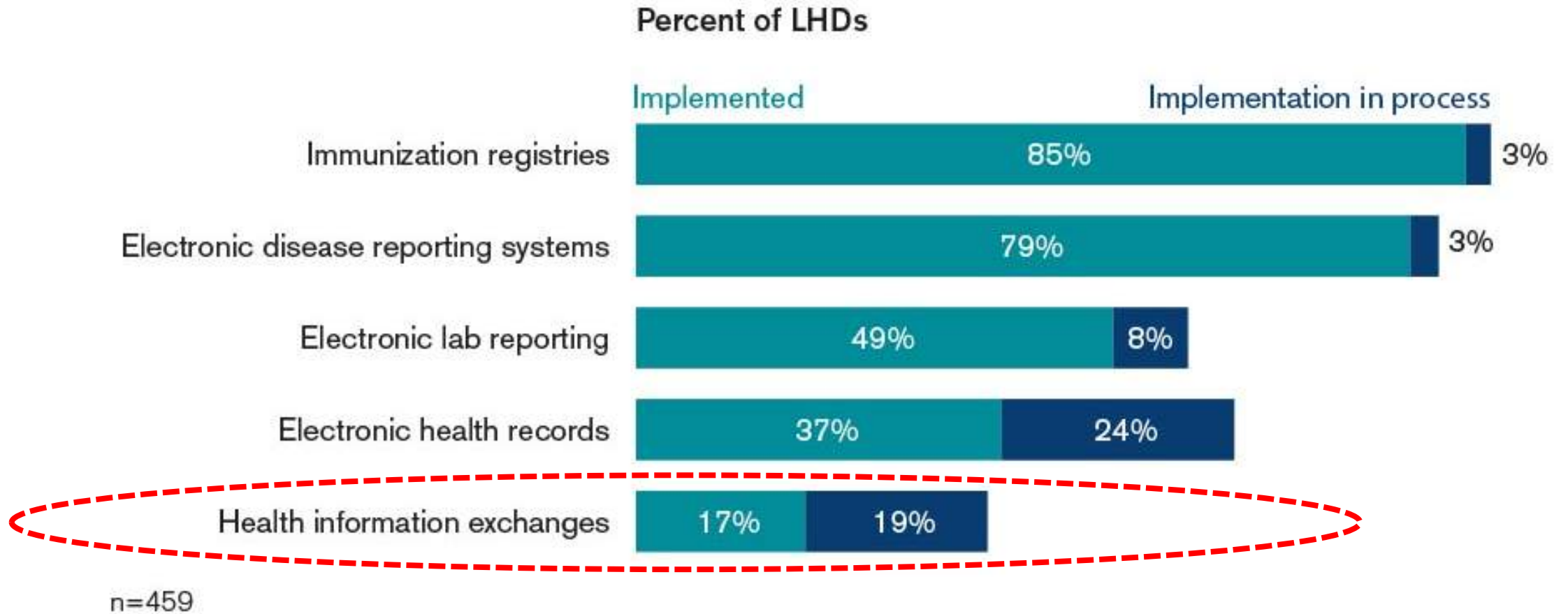
*ASTHO (2011). ASTHO Profile of State Public Health

Current Level of Local Health Department Activity in Information Technology Systems



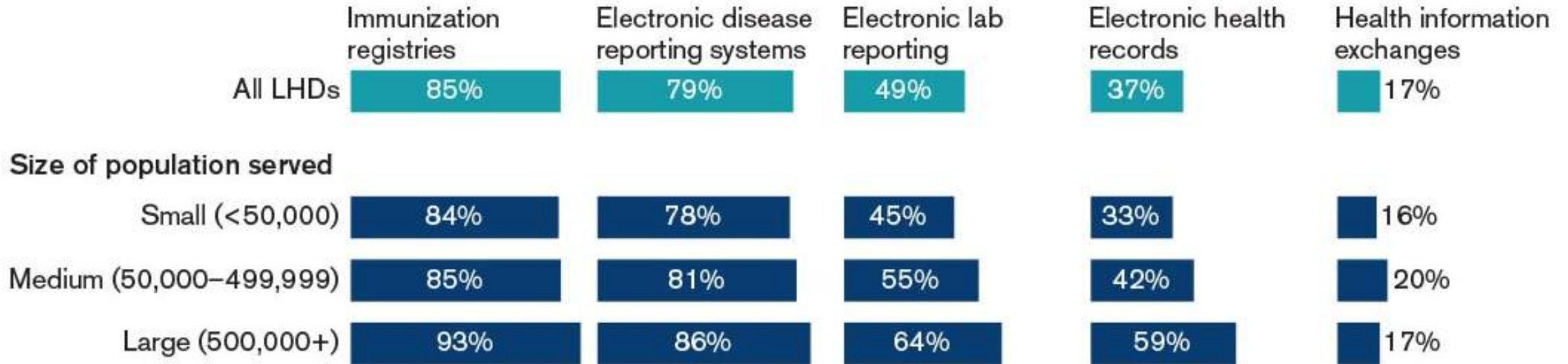
n=459

Current Level of Local Health Department Activity in Information Technology Systems



Current Implementation of Information Technology Systems by Size of Population Served

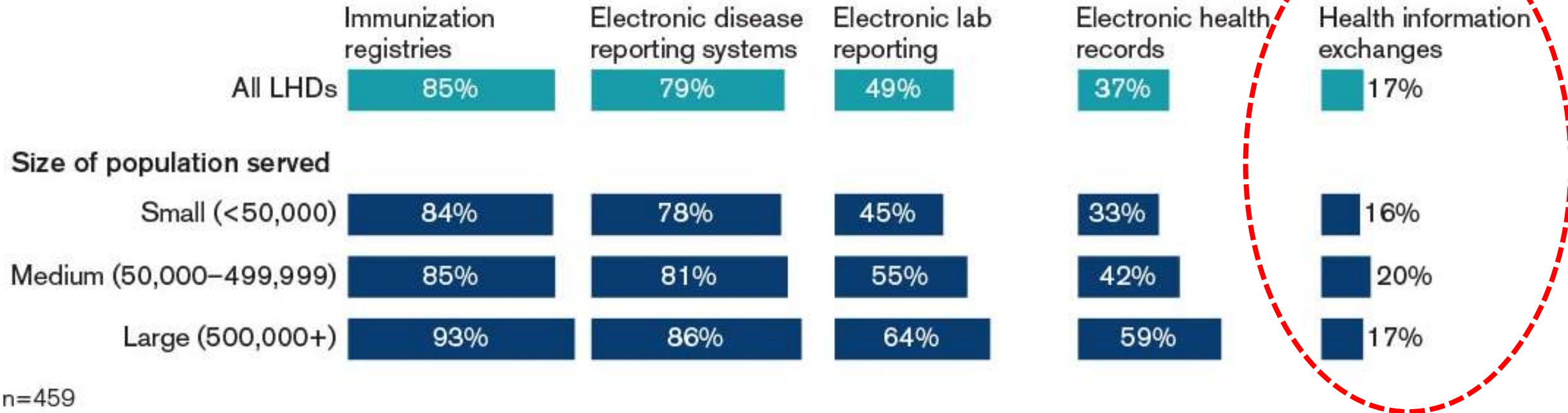
Percent of LHDs that have implemented technology



n=459

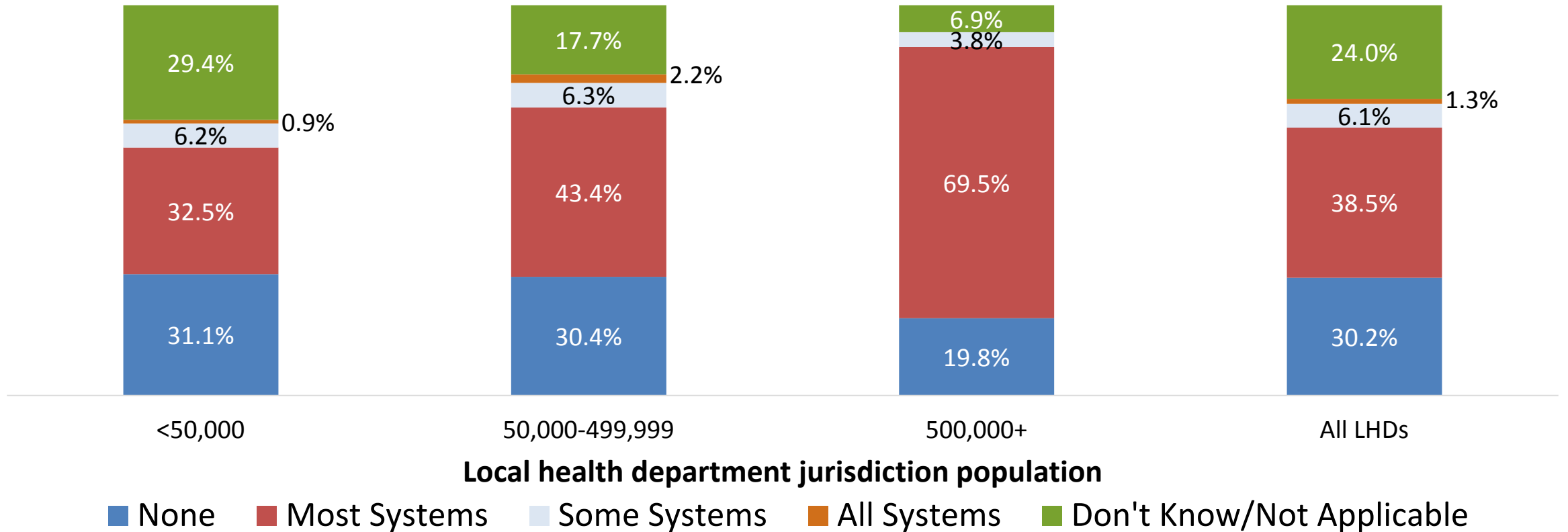
Current Implementation of Information Technology Systems by Size of Population Served

Percent of LHDs that have implemented technology



Interoperability of Information System Used or Maintained by LHD

Percent of Local Health Departments by Interoperability Status



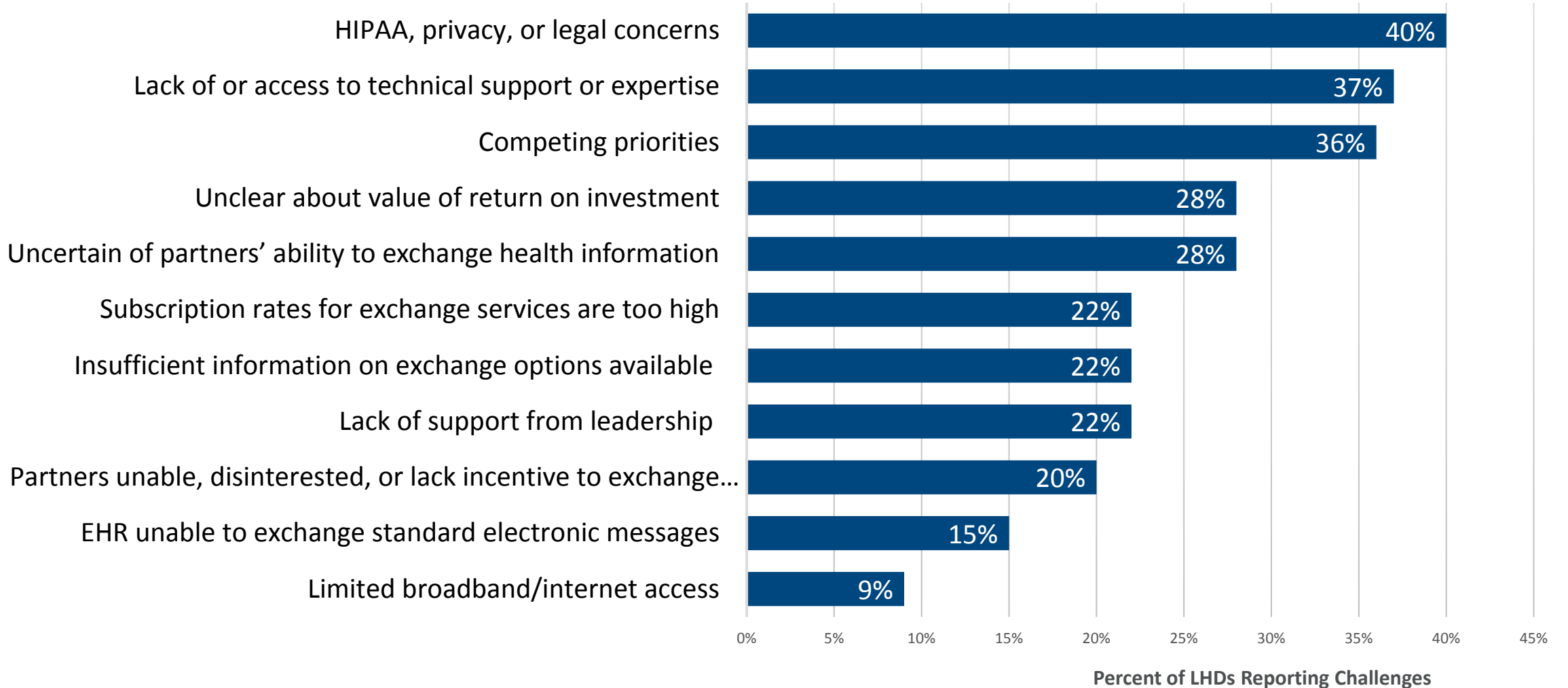
Data Exchange:

Local Health Departments with Other Organizations

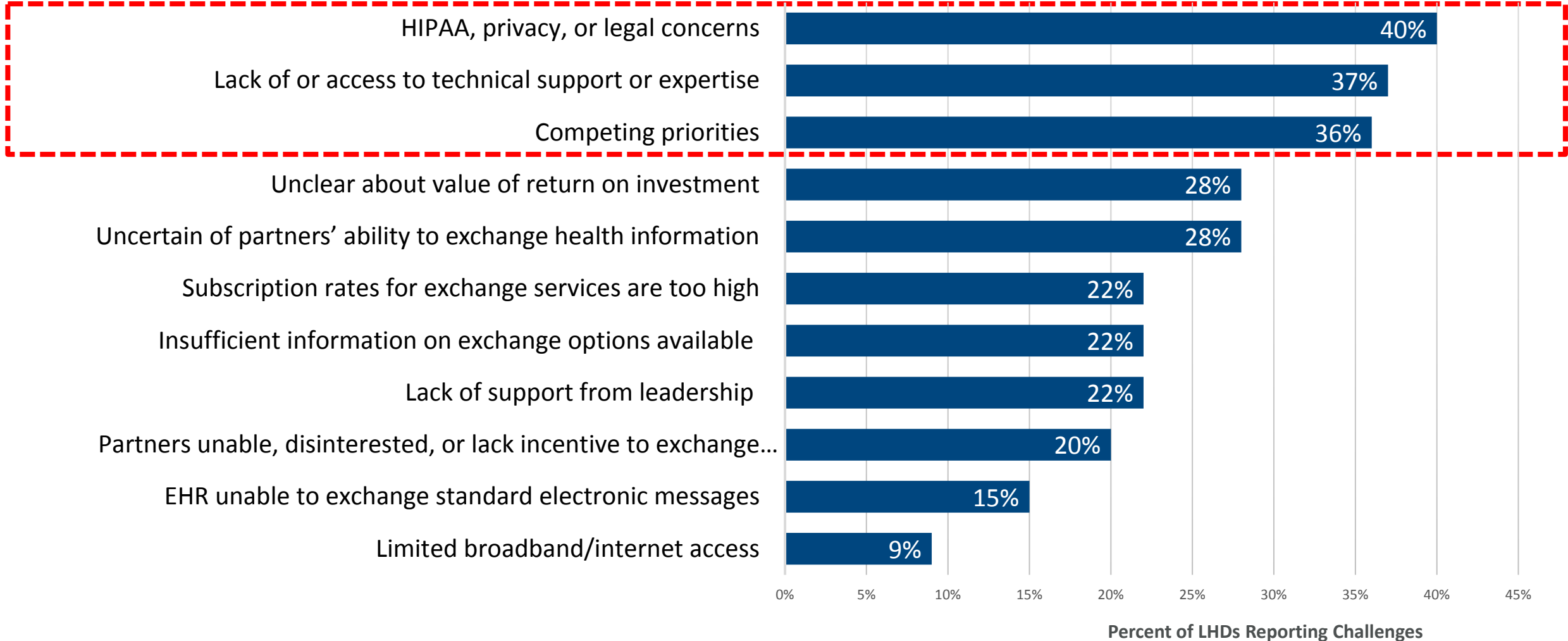
Percent of LHDs which Send or Receive Health Information Electronically by Type of Organization in the Exchange Relationship (N=277)

Organizations in Exchange Relationship	Send (%)	Receive (%)
Hospitals	25	39
Primary care clinics	21	25
Long term care	11	15
Home health agencies	13	14

Largest Informatics Challenges for Local Health Departments



Largest Informatics Challenges for Local Health Departments



Sustainability of eCR and Role of Local Health Depts.

A need for continued investment:

- Leadership and partnering
 - build on syndromic surveillance system experience
 - Inform and address legal and regulatory challenges
- Functional business models
 - membership vs. transactional vs. utility
- Informatics workforce development
 - governance, standards, messaging, and interfaces
- Quality improvement processes
 - developing standard work, solving data issues, enhancing the value,

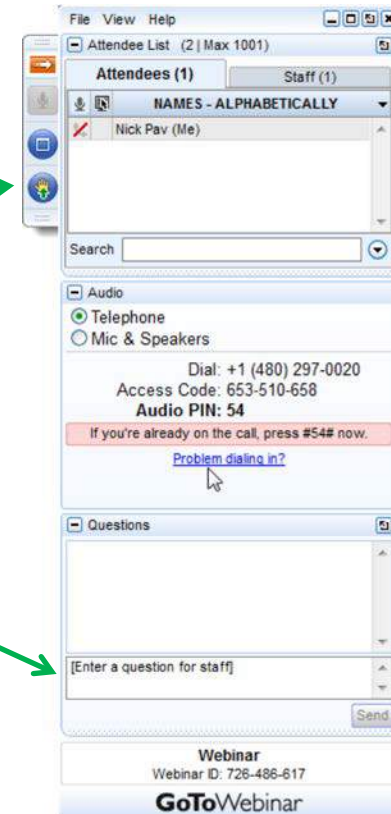
Resources Available to State and Local Health Depts.

- Digital Bridge updates and resources: www.digitalbridge.us
- ASTHO guidebook for state health officials
- 2017 NACCHO Annual Conference Health Informatics & Technology Track – Pittsburgh; July 11-13 : <http://www.nacchoannual.org/>
- ASTHO and NACCHO health department networks
 - ASTHO – Informatics Peer Directors Network; Informatics Policy Committee
 - NACCHO – ePublic Health & Informatics Workgroup; Informatics Champions Initiative
- CSTE eCR state adoption toolkit – *forthcoming*
- 2018 Public Health Informatics Conference –Atlanta; August 20-23



Q & A | Discussion

1. Raise **Hand** to ask verbally
2. Submit using **Question** pane





Thank you!

Please respond to brief survey next week

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Sharing data to improve clinical care and public health.

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