Data Modernization Workshop: Building on Shared Services and Enterprise Technologies

May 19, 2021 – May 21, 2021

Sustainable and scalable public health infrastructure

Plenary Session | May 19th

Moderator
Charlie Ishikawa, Kahuina Consulting, LLC

Presenters
Janet Hamilton, MPH, Council of State and Territorial Epidemiologists
Patrick O’Carroll, MD, MPH, Task Force for Global Health

Introductions

Patrick O’Carroll, MD, MPH
Head of Health Systems
Strengthening Sector
Task Force for Global Health

Janet Hamilton, MPH
Executive Director
Council of State and Territorial Epidemiologists
Data Modernization

Janet Hamilton, MPH
Executive Director
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Approach

Data: Elemental to Health

By committing sustained federal funding to modernize the public health surveillance enterprise, we can transform disease surveillance and save lives. More, better, faster data yielded by secure, interoperable systems will allow public health professionals and policymakers to make better decisions and get ahead of chronic, emerging, and urgent threats.

- Address core areas to support all phases of the response
  - Electronic Case Reporting (eCR)
  - Laboratory Information Systems
    - Electronic Laboratory Reporting to Public Health and Orders
  - Nationally Notifiable Disease Surveillance System
  - Syndromic Surveillance
  - Electronic Vital Records System
Putting it together

Data moves securely and seamlessly between three main actors:

**Patients**
Patients provide health data when seeking medical care

**Health Care**
Electronic health records generated by health care providers contribute patient medical records to the public health surveillance system

**Public Health**
Epidemiologists (disease detectives) in state, territorial, local, and tribal departments conduct investigations to control public health threats, while laboratory results confirm diagnoses and support rapid responses. These data are shared with CDC, advancing national health protection

But other sources play a role, too:

**Non-Traditional Sources**
Data sources from the environment, pharmacies, schools, and prescription drug monitoring programs supplement public health surveillance data

**Vital Records**
Definitive information is collected to keep track of the births and deaths that occur each year

The Public Health 21st Century

Surveillance INTERSTATE

**Health Protection**
Secure, enterprise, interoperable public health data systems rapidly and seamlessly share data, protecting Americans from public health threats of all types—acute, chronic, and emerging
• Easier said than done
Considerations

speed vs accuracy, completeness
Constraints

time
pressure
instantaneously collect & summarize
limited resources
insubstantial data
preparedness infrastructure
People are messy
Transformation
Sustainable and scalable infrastructure

Patrick O’Carroll, MD, MPH
Head of Health Systems Strengthening Sector
Make the most of this opportunity.
The workforce is the infrastructure.
No one* cares about the tech. Just what it can do.
• Make the most of this opportunity.
  • Meet real, functional PH need(s) with this ‘data modernization’
  • Balance power/flexibility/scalability with usability/sustainability

• The workforce is the infrastructure.
  • Be realistic re. PH workforce functions and capacity at various agency levels
  • Build various kinds of expertise where it is needed and can be supported

• The people we serve don’t care about the tech. Just what it can do.
  • Deliver something that meets a real need, quickly—ideally this year.
  • Build near-term solutions on a foundation that will last and support scale-up.
Questions?

- Raise your hand
- Type your questions into the chat
- Use reactions to communicate with presenters.
Next steps

• Continue the discussion on the message board (link provided in the chat).

• Fifteen-minute break: 1:00 PM – 1:15 PM EST

• Next session: 1:15 – 2:15 PM EST
  • Campfire sessions
Thank you.