

Talking Points for Promoting Interoperability

Birth Defects Surveillance—January 2022

These talking points should help public health professionals communicate with their leadership and colleagues on why interoperability is important to birth defects surveillance programs.

The Public Health Informatics Institute (PHII) first developed many of these [talking points](#) in partnership with the Robert Wood Johnson Foundation for an initiative focused on building strategies to modernize public health and infrastructure.

Challenge: Multiple data systems that do not communicate with each other

- The categorical and siloed nature of public health programs, funding streams and information systems rarely support agency-wide solutions or information system enhancements, much less interagency or cross-jurisdictional solutions or enhancements.
- Instead, it is common for public health agencies to use different systems that each support a specific program or disease (e.g., birth defects, vital records, immunizations, newborn screening, syndromic surveillance).
- Rarely are these various information systems designed to exchange data with other information systems within the agency or across jurisdictions (e.g., between states).
- Non-interoperable information systems lack the ability to communicate with one another; exchange data accurately, effectively and consistently; and easily incorporate and use the exchanged information.

There is a need to collaborate with other public health professionals within and across jurisdictions to identify potential solutions to data challenges

- There are public health departments across the United States that have implemented innovative and effective approaches to mitigate or solve their respective data challenges.
- Now is the time to collaborate within and across jurisdictions to learn from one another in an effort to identify potential solutions to common data challenges. While collaboration can benefit all public health departments, those that are smaller and/or poorly resourced may benefit the most from the capacity building that can result from collaboration.
- Health departments should explore opportunities to convene informatics staff across the entire enterprise to develop and implement strategies to address their challenges. This is critical to build enterprise-wide, disease agnostic systems and layer data to promote interoperability, use common standards and leverage common technologies.

Think strategically and pace appropriately

- The current environment, which may well include funding and a sense of urgency, makes it tempting to move extremely fast.
- While timeliness is important, it is also possible to move too fast and thereby miss opportunities to think strategically about what needs to be done and how best to do it.
- Health departments need to evaluate their current capabilities, more ideal capabilities and the steps they should take toward that ideal.¹

Why is interoperability important for BDS programs?

- **Improves timeliness for action and data reporting**

Improved timeliness ensures that data received can be actionable. If a child needs interventions or supports, getting those services a year later isn't as helpful as providing immediate intervention and needs. Currently there can be a delay in getting information on babies or persons with birth defects. If this exchange is automated, timeliness may improve.

- **Allows access to data with less effort**

Rather than a review of health records within a provider facility or by remote access to health records, data can be shared directly with Birth Defects Surveillance (BDS) programs.

Interoperability may reduce provider burden if the reporting is automated (e.g., automated reporting of a birth defects case by use of a trigger ICD-10 code).

- **Reduces data entry errors**

How many times have dates of birth been transposed in a record? Interoperability doesn't eliminate it entirely, but it does reduce the potential for errors found with manual data entry. Data quality staff are still needed to determine the accuracy of the clinical diagnosis and provide this highly-valued clinical review process that plays an important role to help ensure accuracy. However, interoperability may reduce manual data entry errors including potentially missed diagnosis.

- **Improves completeness of records**

Interoperability also may improve the completeness of a record—data elements may be automatically sent so there are no missing fields or forgotten data entries. This may also reduce staff time spent on contacting providers for missing parts of a birth defects case.

- **May benefit other public health programs**

All babies have birth certificates, immunizations, CCHD screening, bloodspot screening and hearing screening. Data sharing between public health programs allows for staff to

¹ PHII (January 26, 2022) Transforming U.S. Public Health Data and Infrastructure to Protect Health and Achieve Health Equity. Retrieved from <https://phii.org/resources/transforming-u-s-public-health-data-%e2%80%8band-infrastructure-%e2%80%8bto-protect-health-%e2%80%8band-achieve-health-equity/>

have the most up to date case information and reduces the need for staff to spend time tracking down missing or inaccurate data. All programs can benefit from each other's hard work. Interoperability can improve communication between programs, providers and specialists. Making the right data available at the right time to the right people through interoperable systems is critically important for optimal population health.²

² PHII (January 28, 2022) Let's talk: building systems that communicate for better health care. Retrieved from <https://phii.org/lets-talk-building-systems-that-communicate-for-better-health-care/>