

## How the Public Health Data Strategy fits within DMI

PHDS and DMI operate hand in hand to meet the public health mission.

### PHDS ACCELERATES DMI

- Lays out important steps that drive DMI priorities forward faster.
- Highlights what is most meaningful and achievable over the next two years.
- Identifies actionable goals that will yield the most impact.



### **DMI ENABLES PHDS**

- Provides the vehicle for broad transformation.
- Includes major improvements for public health data and systems,
- Identifies what is needed to carry out the work – such as a state-of-theart workforce, expanded partnerships, culture change, and unified governance

# Four major Public Health Data Goals enable the core public health missions

**Public Health Data Goals** 



### Strengthen the core of public health data

Ensure Core Data Sources<sup>1</sup> are more complete, timely, rapidly exchanged, and available to support the integrated ability to detect, monitor, investigate, and respond to public health threats

## Accelerate access to analytic and automated solutions to support public health investigations and advance health equity

Make tools available so STLTs and other public health decision-makers can better use public health data to address health disparities

#### Visualize and share insights to inform public health action

Serve as a trusted source for near real-time visualizations and offer situational awareness for the public and decision-makers to understand risks, make decisions, and direct resources

### Advance more open and interoperable public health data

Enable exchange of interoperable data so that healthcare, STLTs, federal agency partners, and CDC programs can access and use data they need, when they need it

<sup>1.</sup> Case (including electronic case reporting [eCR]), lab (including electronic lab reporting [ELR], Electronic Test Orders and Results [ETOR]), emergency department (including National Syndromic Surveillance Program [NSSP] emergency department data), vital statistics, immunization, healthcare capacity (including National Healthcare Safety Network [NHSN] data)

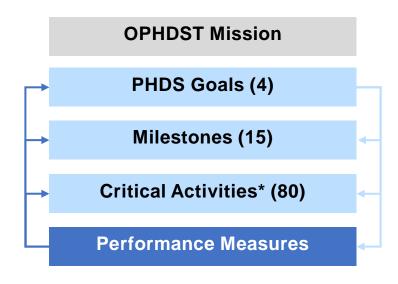
## Public Health Data Goals drive key outcomes over the next 2 years

G	oals	By the end of 2024, 2-year milestones strive to ensure		
1	Strengthen the core of public health data	<ul> <li>States, tribes, localities, and territories (STLTs) have reduced reporting burden as case data are electronically reported in a consistent format, using a <u>CDC Front Door</u> concept</li> </ul>		
		<ul> <li>Public health labs can forecast needs better with integrated, electronic ability to see test orders before samples arrive and ensure faster exchange of orders and test results with submitters</li> </ul>		
		• STLTs can access lab reports more quickly and through multiple pathways, enabling faster public health action (e.g., case investigation, contact tracing)		
		<ul> <li>CDC can access lab, case, and mortality data faster, enabling robust situational awareness that informs decision-making across the nation</li> </ul>		
		<ul> <li>STLTs and CDC programs have access to more early warning signals from emergency departments (EDs), with up to 80% participation by US non-federal EDs in the <a href="National Syndromic Surveillance Program">National Syndromic Surveillance Program</a> (NSSP)</li> </ul>		
2	Accelerate access to analytic and automated solutions t	<ul> <li>STLTs and CDC can identify emerging threats in all parts of the nation in a timely way as more critical access hospitals in rural communities send case data electronically</li> </ul>		
		<ul> <li>STLTs can address gaps in the public health workflow such as linking case, lab, and immunization records to enrich data and inform public health action through reusable technologies</li> </ul>		
		<ul> <li>STLTs and communities can identify, prevent, and mitigate disproportionate impact on populations through use of automated reports provided by CDC, using CDC public health databases</li> </ul>		
3	Visualize and share	STLTs and CDC programs receive quicker access to data and insights from Core Data Sources¹		
J	insights to inform public health action	<ul> <li>Americans can access near real-time data and visualizations made available via a centralized data dissemination platform (e.g., a Public Health Data Channel like the National Weather Service) to improve understanding and inform decisions about public health risks</li> </ul>		
4	Advance more open and interoperable public	<ul> <li>CDC establishes a strategic pathway of data exchange with providers' electronic health records (EHRs) through at least 2 initial</li> <li>Trusted Exchange Framework and Common Agreement (TEFCA) for public health use case pilots</li> </ul>		
	health data	<ul> <li>CDC and STLTs increase data exchange back to healthcare providers, helping to inform clinical decision-making</li> </ul>		
0.		• Data use and access are easier through established, standardized agreements (e.g., for sharing emergency department data with CDC programs, STLTs), enabling quicker access to minimal data necessary for response during a public health emergency		
		• CDC has measurably and securely increased the number of accessible open public health data sets for timely use and faster insights		

Accomplishing the Public Health Data Goals requires collaboration and partnership with STLTs, healthcare partners, and other federal agencies

## PHDS Progress To-Date (1 of 2)

#### **CASCADE OF ELEMENTS**



#### PROGRESS TO-DATE (SINCE APRIL 2023):

- 1 completed milestone
- As of June 23, 2023, 25.1% (342/1,360) of critical access hospitals have implemented eCR
- 17 critical activities completed
- 30 critical activities in progress
  - 9 critical activities due between Sept Dec 2023

(\*) Number of activities may change overtime, as tracking and reporting across workstreams improve

## PHDS Progress To-Date (2 of 2)

## **Sample Critical Activities**

Project	Activity	Due Date
DMI Analytics: SET-NET	Route data from SAMS SDX to Enterprise Data Analytics & Visualization platform	September
STLT Data Sharing	Engage pilot jurisdictions on reviewing the Shared Validation and Power BI Jurisdictional proof of concepts	September
DMI Program Enablers	Implement a Service Level Agreement	September
PH TEFCA	Assess, Engage, and Finalize a QHIN Partner	December

## Dr. Cohen's Priorities and How OPHDST is Supporting

1. Readiness and Execution for Fall and Winter Respiratory Illnesses

OPHDST is working on visualizations through dashboard development

OPHDST submitted three initiatives for consideration