



## **CSTE Surveillance/Informatics Steering Committee Update**

CSTE Executive Board Meeting, January 2017

Steering Committee Chair: Kathy Turner, PhD, MPH

CSTE Staff: Meredith Lichtenstein, MPH, Becky Lampkins, MPH,  
Janet Hui, MPH, and Monica Huang, MPH

### **Discussion Items:**

- eCR and the Digital Bridge
- IFA Pilot Project



### **Surveillance Practice and Implementation Subcommittee – Gillian Haney (MA)**

- State Reportable Conditions Assessment (SRCA): CSTE is developing an SRCA Query Database that will house 2015 and 2016 SRCA data and will be launched in winter/spring 2017. 43 of 52 jurisdictions have completed the 2016 SRCA. Once the remaining 9 jurisdictions respond, CSTE will begin QA process to finalize 2016 SRCA data.
- Reportable Conditions Knowledge Management System (RCKMS): CSTE is working on RCKMS Phase III activities for the initial implementation of the tool. (see next page).
- Other activities:
  - Discussed public health electronic case reporting initiatives (Digital Bridge updates)
  - Reviewed CSELS/DHIS plans to make nationally notifiable disease data more accessible and useful
  - Follow up on CDC interdepartmental working group effort to coordinate/streamline language across FOAs for funding IT and informatics activities
  - Discussed potential for 90/10 match funding through HITECH and new Medicaid Directors Letter



### **Surveillance Policy Subcommittee – Janet Hamilton (FL)**

- Discussed the feasibility of jurisdictions receiving ELR results from CDC where CDC is the testing laboratory (discussed with directors of CDC laboratories) – to hold follow up discussion in February
- To submit comments on Federal Register notice regarding National Parks Service Office of Public Health Disease Reporting and Surveillance System (recommending coordination with National Syndromic Surveillance Program and data sharing practices with state health departments)
- Veterans Health Administration – continued conversations regarding reporting practices from VA to public health (follow up items from 2016 position statement)
- Discussed two CDC Reports to Congress on Data Collection Systems (2014) and Single Web-based Data Collection Information Technology Platform (2016)
- Future topics to consider in subcommittee: data suppression guidelines for nationally notifiable conditions; standardized guidance for submission of NND data (*MMWR* week and year; when to send notifications, etc.)



### **Electronic Laboratory and Disease Reporting Subcommittee – Kate Goodin (Maricopa County, AZ)**

- Discussion on collecting pregnancy status via ELR (follow-up to Zika EHR Vendor call topic)
- Held demonstration of RCKMS Authoring Interface
- Discussions around the HL7 implementation guide (IG) for electronic case reporting
- Discussed Reportable Conditions Trigger Codes (RCTC) implementation and content with CDC
- Will develop an 'electronic surveillance systems' assessment as a follow-up to the 2012 NEDSS Assessment (spring 2017)
- National ELR Working Group: Has discussed Zika lab reporting needs/issues, receiving PFGE results via ELR, and the HL7 Lab Reporting Initiative Implementation Guide. Workgroup members will begin editorial review of 2013 National ELR Assessment to finalize 2017 follow-up assessment.

## Funded Project Reports

- **EDRS:** In 2016, CSTE convened a small workgroup to develop an assessment tool to explore the feasibility and utility of electronic death registration systems (EDRS) for surveillance and emergency response. The assessment tool was developed by a workgroup representing state/local health department epidemiologists (surveillance and disaster epidemiology), state vital registrars, medical examiners, and CDC SMEs. The assessment pilot will be completed in January 2017 and full launch will be completed later in 2017 (following OMB approval). A portion of the assessment will be sent to State Epidemiologists and a portion will be sent by NAPHSIS to the State Registrars. A summary report will follow in late 2017.
- **Informatics Field Assignee (IFA) Pilot Project:** CSTE, in collaboration with CDC, will identify jurisdictions (through an RFP process) to participate in the Informatics Field Assignee pilot project to advance CDC Surveillance Strategy goals (NMI, ELR, syndromic surveillance, electronic death reporting or eCR) and address gaps in existing informatics capacity at the jurisdiction. An RFP is currently open (closes on January 30<sup>th</sup>) and 15 agencies have expressed interest by submitting a Letter of Intent to apply. Based on quantity and quality of applications, CSTE will fund 2-3 jurisdictions to recruit and place an IFA for a one-year assignment (funding may be available up to 3 years).
- **NNDSS Modernization Initiative (NMI):** CSTE continues to manage the NMI Technical Assistance (TA) Leadership Team, the NMI Communications & Training Workgroup, and the NMI Evaluation Workgroup, specifically focusing efforts on the TA project evaluation. APHL continues to provide TA support to 8 pilot jurisdictions (AZ, CA, FL, MI, MN, NC, NY, OR) through their own CoAg for Genv2, Hepatitis, STD, and Congenital Syphilis message mapping guides (MMGs). CSTE continues to evaluate the cost, time and effort of implementing MMGs and onboarding to MVPS. As of 1/16/17, Oregon and Michigan are in production for Genv2 and Hepatitis MMGs. CSTE will switch focus of evaluation from TA to onboarding in spring 2017.
- **Harmonization:** In follow-up to the 2015 Surveillance Summit, CSTE has been funded to host up to 6 small meetings with 8-10 epi SMEs to harmonize a single data element or group of similar data elements at each meeting. Data elements may include: travel history, pregnancy status, fever, and demographics. 3 meetings will take place before 6/30/17.
- **Antimicrobial Resistance Surveillance Taskforce:** AR taskforce has expanded membership to about 30 representatives from CSTE, CDC, and partner organizations, including ASTHO, NACCHO, APHL, APIC, SHEA, IDSA, ASM, WHONET, US DoD, and VA. Currently planning a strategic planning meeting for March 13-15 to develop a strategic map for an AR surveillance system of the future. Goal is to develop a strategic plan that is ready to seek CDC clearance by July.
- **RCKMS:** CSTE is currently in Phase III of the RCKMS project, focusing on an initial implementation of RCKMS. The activities for this funding year are as follows:
  - **Technical Development:** CSTE is continuing to partner with OpenCDS implementer HLN Consulting LLC to implement new releases of the RCKMS tool, and APHL on integration activities with the AIMS platform. Major milestones include:
    - **HIMSS 2017 Interoperability Showcase (Feb 2017):** CSTE and APHL will demo the RCKMS decision support tool on AIMS at the HIMSS Interoperability Showcase in February 2017. This showcase is CDC funded and provides an opportunity to illustrate the eCR flow to EHR vendors and healthcare providers.
    - **Digital Bridge (DB) eCR Implementation Sites (Feb 2017 onward):** The current version of the RCKMS tool will be available as part of the DB eCR implementation sites beginning in February 2017. The DB eCR implementation sites will be using RCKMS for 5 pilot conditions of Chlamydia, Gonorrhea, Pertussis, Salmonellosis and Zika.
    - **New release of RCKMS Authoring Tool (April 2017):** CSTE will be releasing a new version of the RCKMS Authoring Tool for jurisdictional users to train on, beginning in April 2017. The new version incorporates usability enhancements based on feedback from the RCKMS Focus Group from August 2016.
  - **Training:** CSTE will provide training for the DB pilot jurisdictions beginning around February 2017. CSTE will also be conducting a broader training for all interested jurisdictions to use the new

release of the RCKMS Authoring Interface. Online training will be provided between April and May 2017, with additional on-site training at the CSTE Annual Conference in June 2017.

- *Completion of Phase II Content Development:* Value sets are largely completed for Phase II conditions (74 conditions that are notifiable and have a position statement). CSTE is re-vetting the content via a second round of the Content Vetting WG, with a focus on reviewing value sets.
  - *Communications:* The RCKMS team has brought on a part time communications specialist to create communications materials including branding, promotional videos, training videos, website updates, one-pagers and FAQs. We are currently updating the CSTE RCKMS webpage and are planning a broader website update for April 2017.
  - *Content Development for other Reportable Conditions:* The content development team is currently assessing the scope of other reportable conditions that would need to be covered by RCKMS. However, work on creating the content has been postponed until the Phase 2 conditions finish round 2 of review.
  - *Implementation of Content:* CSTE is currently implementing the default content for the 5 pilot conditions of Chlamydia, Gonorrhea, Pertussis, Salmonellosis, and Zika into the RCKMS tool, for use in the DB pilots. The content for the remaining conditions will be implemented on a rolling basis, as it gets finalized.
  - *Coordination with other eCR activities:* Representatives from the RCKMS team actively participate in other eCR related activities including the Digital Bridge Requirements Workgroup, Technical Architecture Workgroup, the HL7 Public Health and Emergency Response (PHER) Workgroup and the CSTE eCR Adoption Toolkit work.
- eCR Adoption Toolkit: In fall 2016, CSTE's consultant, Kelley Chester of C3 Informatics, LLC, conducted one-on-one interviews with each jurisdiction represented on the eCR Adoption Toolkit Development Workgroup and revised the toolkit's Table of Contents based on those interviews. CSTE hosted an in-person working meeting on 1/10-1/11/17 in Atlanta to identify and prioritize tools that need to be included/developed in each section of the toolkit. CSTE will work on prioritizing next steps in order to build out the online toolkit.

## **Liaisons**

BioSense Governance Group – Jim Collins (MI)

Joint Public Health Informatics Taskforce (JPHIT) – Janet Hamilton (primary) & Kathy Turner (secondary)

NEDSS Base System (NBS) User Group – Erin Holt Coyne (TN)

International Society for Disease Surveillance (ISDS) – Vacant

MMWR Annual Summary of Notifiable Diseases – Janet Hamilton & Leah Eisenstein (FL)

National Association for Public Health Statistics and Information Systems (NAPHSIS) – Kate Goodin

Association of State and Territorial Health Officials (ASTHO) – Charlie Hunt