2019-2024 Public Health Emergency Preparedness (PHEP) Notice of Funding Opportunity – Supplemental Guidance and Resources

Domain 6: Considerations for Electronic Death Registration Systems

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Overview

Electronic death registration (EDR) systems are state-based systems that facilitate collaboration among multiple death data providers, such as medical examiners, coroners, and physicians, to enhance mortality data collection and quality control. EDR systems play an essential role in improving the timeliness and accuracy of mortality data at the local, state, and national levels. Mortality is a key outcome used to track and respond to public health emergencies, such as bioterrorism, opioid overdoses, influenza outbreaks, environmental health hazards, or natural disasters.

Purpose

Timely and accurate mortality data helps public health officials identify and monitor emerging and existing health threats and trends. There are many benefits to expanding statewide coverage and improving coordination of stakeholders to enhance EDR capability. These activities can contribute to reducing the time needed to characterize trends through the provision of more accurate data and thus, potentially reduce the impact of public health threats. Mortality data can greatly enhance public health surveillance and emergency response efforts.

Programmatic Requirements

Recipients must develop or support the advancement of state-based EDR systems that can provide more timely mortality surveillance information to CDC and state epidemiologists.

PHEP recipients that have not yet begun developing EDR preparedness capability should prioritize development of scalable plans designed to initially implement an EDR system, such as developing reporting and technological capability; assessing potential legal information sharing barriers and restrictions; and other actions that will help establish initial functionality. This could also include implementing pilot projects. An option for EDR development planning can include working with the jurisdictional vital records office (VRO) and the CDC National Center for Health Statistics (NCHS) to design, plan, and implement the next generation EDR system in the state. States electing this option should work directly with NCHS in the development of its scalable plans.

PHEP recipients that have existing operational EDR systems should work with the appropriate public health partners to prioritize goals and objectives that advance the use and geographic coverage of current vital records systems to improve vital records data timeliness, quality, and access. Such activities include incorporating updated technologies; implementing updated information systems with VRO vital registration; and establishing partnerships that increase physician, medical examiner, or coroner, and funeral home participation.

Sample Strategies and Activities

The sample strategies and activities provided below are examples, not programmatic requirements. Recipients should select strategies and implement activities that expand and sustain current capacity based on the priorities and public health needs of their jurisdiction. This will enable them to make progress toward the outcomes defined in the PHEP logic model.

Depending on prior experience with using EDR, next steps for recipients may include the following activities.



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- Convening the jurisdiction's epidemiologist, PHEP director, vital registrar, medical examiner or coroner, and information technology (IT) staff regarding mortality surveillance and EDR capabilities; emergency planners should attend as indicated.
- Implementing the Validations and Interactive Edits Web Service (VIEWS II) developed by NCHS.
- Mapping mortality data flow in the state and identifying opportunities (IT and business practices) to streamline reporting.
- Conducting outreach to certifiers of death, including, coroners, medical examiners, and other data providers.
- Assessing the capacity of current systems and developing plans and strategies for improvement.
- Increasing adoption of EDR within jurisdictions.
- Improving use of handheld technology and other technologies.
- Targeting major hospital systems for EDR participation and for improved interoperability between EDRs and hospital IT systems.
- Targeting medical examiners and coroners for EDR participation and for improved interoperability between EDRs and medical examiner and coroner case management systems.
- Expanding adoption of medical examiner and coroner case management systems that are interoperable with EDRs.
- Coordinating with partners to facilitate integration of EDR systems into preparedness planning, including NCHS and other relevant CDC programs, funeral director associations, jurisdictional vital statistics, national associations, and others.
- Increasing adoption of Health Level 7 (HL7) and integrating the Healthcare Enterprise (IHE) standards.
- Developing system "flags" to identify specific, prioritized information to be collected during public health emergencies or events.
- Developing protocols for real-time reporting of deaths related to public health emergencies.

EDR Tools and Resources

Title	Description	Location
Electronic Death Reporting	Reference guide for state and local	http://www.cdc.gov/nceh/tracking/
System Online Reference Manual	agencies on implementing, updating,	https://ephtracking.cdc.gov/
	and maintaining an EDRS.	

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