

Local Health Department Perspective: Health Information Technology

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Direct Care Provider

- Support direct service efficiently
- Reduce errors
- Support quality assurance and improvement efforts
- Facilitate transfer of information needed to provide care
 - Laboratory testing
 - Referrals
 - Prescriptions

Direct Care Provider:

- Eliminate paper records
- Promote consistency and quality of care
- Improve ability to monitor performance
- Communicate accurately and quickly
- Measure outcomes and monitor indicators



Public Health Authority

- Surveillance and response
- Health status and disease monitoring
- Population-based health care / quality improvement
- Health care access and utilization
- Health education & communication
- Population-based research

LHD as Public Health Authority: What we need

- Access to aggregate data
- Access to near real time data for reportable diseases
- Access to near real time surveillance information
- Identification of populations at risk
- Access to immunization information

As Public Health Authority: What we provide

- Advisories regarding events, outbreaks
- Identification of populations at risk
- Guidelines, recommendations, schedules
- Analysis of quality measures
- Case & syndrome definitions
- Diagnostic guidelines & criteria
- Coordination and facilitation of scarce community resources

Opportunities / Challenges

- HIT Stimulus funding
- State eHealth Plan
- HIT Resource Center
- Local / State Health Information Exchange
- Electronic Medical Records

Health Information Exchange

- Participant member
 - Interfaces
 - Evaluation of quality of care
- Public health partner
 - Decision support
 - Access to aggregate data

Direct Care Provider: Participant Member

- Health information exchange
 - Laboratories
 - State immunization registry
 - Dentrix (in-house dental software)
 - Pharmacy
 - Consults & referrals
 - Case management partners
 - Health care access referrals
 - Dental provider referrals and partners

Public Health Partner

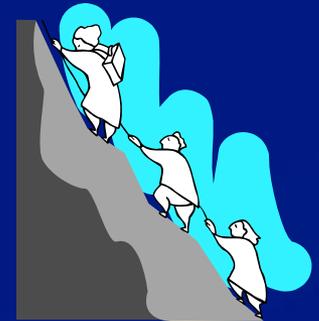
- To develop meaningful use functionality
 - Clinical decision support
 - Meet public health objectives and measures
 - Immunization
 - Public health alerts
 - Population measures
 - Surveillance measures
 - Clinical and community dashboards

Staged Approach (4 Stages)

- Immunizations (1)
- Reportable diseases (1)
- Syndromic surveillance (1)
- Public health disease registries (2)
- Develop chronic disease registry (3)
- Knowledge management (4)
- Evaluate quality and effectiveness of health care system (4)
- Decision support (4)

LHD Challenges

- Public health infrastructure and capacity varies widely
- Few EMRs come “off the shelf” with interfaces for key public health reporting systems
- Public health systems are still in silos within program areas
- Privacy & Security
- Cost: dollars, time and human resources
- Expectations about timeliness, quantity and relevance of data



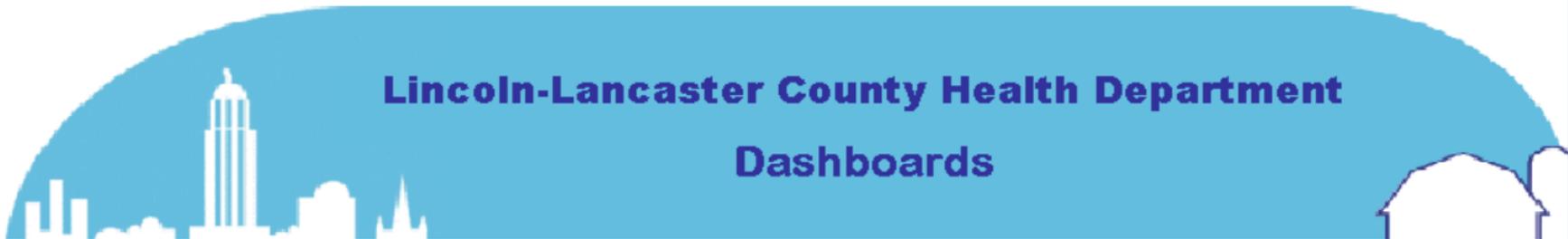
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- BRFSS
- Population
- Vitals
- YRBS
- Mayors
- EPH
- PHAN

The Lincoln-Lancaster County Health Department created this dashboard with an intent that it becomes the decision-makers desk top tool to select and organize the information that is most needed. It enables you to select from a menu of possible indicators, graphs, charts, maps and reports. Everyone can create their own personalized selections, add tabs and manage the information they need.

The graphs and charts contain significant smart technology that allows the user to select different years or different variables from drop downs within the graph panel. Previously, the best we had for this capability was the on-line query but you could only do one measure at a time. Now you can have multiple measures and multiple ways to review them; all available at your fingertips. Overall, between the dashboard technology and the new strategy for managing source data, we have significantly reduced the amount of epidemiology resources required to get information into the hands of department decision-makers and information users.