

Public Health Practice Stories from the Field

National Public Health Improvement Initiative in Tennessee

Strengthening Public Health Data Systems
Through Performance Improvement



Engaged

partners from public health and stakeholder organizations

Developed

a plan for efficient and effective vital records keeping

Identified

strategic opportunities for action under difficult economic conditions

Launched

a system that will help Tennessee meet national public health standards

Efficient data systems are critical to operating a public health system that has the capacity to monitor the public's health and measure progress toward improved health outcomes. To build its monitoring and measurement capacity, strengthen its performance management systems, and prepare for national accreditation, the Tennessee Department of Health is revamping its vital records system.

Funding from the Centers for Disease Control and Prevention's (CDC) National Public Health Improvement Initiative (NPHII) made it possible for the Tennessee Department of Health to update its antiquated, largely paper-based vital records system. This new online system will improve timeliness and accuracy, replace multiple systems used to track information, expand opportunities to link data systems with standardized data elements, and enable Tennessee to assess and monitor health status more effectively. This is part of a larger initiative to establish a Performance Management Division within the health department's Office of Policy, Planning, and Assessment, which will collaborate with partners to plan, identify performance indicators, assess public health performance, and implement improvements to the system.

Over the past several years, the Tennessee Department of Health has had to adjust to financial insecurity and the loss of key staff, but their continued planning and preparation for the revamped vital records system has and will continue to serve them well as they build management capacity and apply for accreditation.

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What We Did

Before funding was provided, we convened partners, researched vendor options, assessed conditions and needs, and conducted a comprehensive review of our existing system to inform development of the framework for our new system. CDC's NPHII funding allowed us to build on this collaborative process and move forward. In year one, funds were used to

- Listen to the needs expressed by partners and stakeholders
- Issue a request for proposals for the Vital Records Information Systems Management commercial system and select a vendor using a competitive process
- Implement the new system in fall 2011, which is expected to be fully operational by 2016

What We Accomplished

In year one, we were able to

- Document a business process and implement measures, such as rolling out the current U.S. standard death certificate a year prior to the launch of the new death registration system; this will enable us to track and measure the effectiveness of the new system independent of the change in the certificate
- Streamline decision making in vital records
- Reduce the time it takes to register birth events and process birth certificates
- Improve communication with customers, including reducing e-mail inquiries through the General Commissioner by 43 percent after improving the vital records website
- Apply this successful planning process — consensus building, methodical thinking, and organized framework — in five different divisions, seven health regions, and with partners in the field

What We Learned

Key factors to the success of year-one activities included

- Continuing to plan and implement improvements even though many elements of the initiative had to be put on hold due to the recession — the program was ready to move forward quickly once funding was available
- Capitalizing on small-scale opportunities to improve quality and efficiency — by gathering input from partners and stakeholders, we were able to identify and put in place small changes that made a big difference

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