Continuing Education in Public Health Informatics

2008 PHDSC Annual Meeting
National Center for Health Statistics
Hyattsville, MD

November 12, 2008
Background: Research and Evaluation Studies

• **2005 NACCHO Profile Study**
  – Provides a bird’s eye view of informatics/HIT needs among the nearly 3,000 local health departments
  – Stay tuned for 2008 Profile results!

• **2007 NACCHO RHIO Research**
  – The majority of LHD respondents only indicate informal dialogue with HIEs/RHIOs
  – Lack of LHD participation early on, limited connection with quality improvement efforts, efficient systems and cost reduction in health care.

• **2008 NACCHO AMIA Focus Group**
  – Participants indicated obvious gaps in awareness about how local informatics activities interrelate and connect with national public health informatics initiatives

• **2008 NACCHO Program Evaluation** – Some of the primary recommendations include:
  – Focus primarily on specific products and tools that can address LHD needs - BPA
  – Support Web trainings and Work on statewide or regional levels (SACCHOs, etc) to bring trainings to the practice community
Percentage of LHDs Reporting a High or Moderate Need for Staff Training in Selected Informatics Areas

- Using and interpreting quantitative data: 68%
- Using and interpreting qualitative data: 67%
- Using software analytical tools: 63%
- Protecting confidentiality: 60%
- Basic computer applications: 57%
- Designing and maintaining a public health website: 55%
- Locating evidence-based Internet information: 54%
- Locating consumer health information: 53%

Percentage of Respondents
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What PHI topics interest you most?

- Health Information Exchanges/Regional Health Information Orgs (RHIOs) 75.0%
- Business Process Analysis and Redesign 62.5%
- Surveillance and Case Reporting (including BioSense, NEDSS, etc.) 25.0%
- Privacy and Security 37.5%
- Public Health Informatics Standards and Use Case Development 50.0%
- National Policy Initiatives (AHIC, PHIN, CCHIT, etc.) 50.0%
LHDs want Web-based tutorials on vocabularies and standards.
What is your top priority to improve public health informatics capacity in your health department?

“I'd like to be able to answer "Data Sharing Agreements with Health Care Providers" or "Interoperability with State Public Health Data Systems". But the truth is, if we began to exchange all the data I would like, we would not be able to handle it yet. What we need first is informatics workforce development. Our workforce is not yet prepared to handle cutting edge data analysis or manage complex IT projects. In fact, we need to increase informatics skills at every level. We also need front line staff to become more comfortable with computers and software so that we can take full advantage of systems--like electronic medical records and patient management systems--that will lay the foundation for true, community wide health information exchange.”

Marcus Cheatham, PhD  
Assistant Deputy Health Officer  
Ingham County Health Department  
Lansing, Michigan
Public Health Informatics Workgroup Logic Model

**Inputs/Resources**
- PHIN/NEDSS
- CDC
- PHII Informatics Competencies
- RHIOs & InfoLinks Grants
- NHIN
- AHIC
- HITSP
- PHDSC
- HIMSS
- eHI
- AMIA
- HRSA

**Activities**
- Workgroup representation on national partner initiatives
- Make connections with NACCHO’s Projects to Informatics
- Provide input in National Policy Initiatives (eHI’s Blueprint, AHIC Use Cases, etc.)
- Help build and promote Public Health Informatics Tracks at meeting/confere nces (PHIN, AMIA, etc.)

**Outputs**
- **Develop resources for LHDs (best practices, trainings, etc.):**
  - Advocate that Federal partners require that LHDs be mandated participants in funded RHIOs and HIE projects
- **Increase readiness of more local public health professionals to participate in informatics initiatives (Workforce development, Communities of practice, Common Ground, PHAB, etc.):**

**Outcomes (Short/Long Term)**
- Support integrated information systems that improve LHD performance of essential services in accordance with the operational definition of a local health department
- Enhance and utilize informatics to support LHD capacity to achieve health equity through principles of social justice and human rights
- Foster development of a competent public health informatics workforce for local health departments

**Impact**
- Support LHD capacity to build and maintain public health systems that address NACCHO’s Strategic Plan

NACCHO
National Association of County & City Health Officials
NACCHO Public Health Informatics Advisory Workgroup
Recommendations for Public Health Informatics Workforce Needs

Make resources available for LHDs to be involved in public health informatics initiatives.
This can be done through strengthening local health department capacity, technical assistance, and workforce development, and infrastructure development.

• LHDs are first responders in public health emergencies and it is important for local informatics staff to understand and have the capacity to respond effectively to information gathering and be able to link critical information with a community’s clinical care partners (community health care centers, hospitals, private practices, etc.).

• LHDs need resources targeted to provide opportunities for more locals to participate in the informatics learning community. As with local health participation in national emergency preparedness efforts, federal agencies should consider including components in state grant guidelines requiring local health department involvement in planning, communication, and building public informatics infrastructure.
Workforce Development - Continuing Education Programs in Public Health Informatics

• Partnership with the Public Health Data Standards Consortium (PHDSC), Association of State and Territorial Health Officials (ASTHO), the Johns Hopkins Bloomberg School of Public Health (JHSPH) and Healthcare Information Management & Systems Society (HIMSS) to develop and implement LHD and SHD focused training program

  – Equips public health professionals with the fundamental informatics knowledge and skills needed to:

    • Support their increasing role in the NHIN and local and regional Health Information Exchanges (HIEs)
    • Enhance their business processes and increase the core capacity and IT infrastructure to adhere to the Operational Definition of a Local Public Health System - Core Public Health Functions and the Ten Essential Public Health Services, Accreditation
    • Meet existing and emerging public health informatics competencies requirements
Continuing Education in Public Health Informatics

Goal

- Deliver general training in PHI to provide public health & healthcare workforce and information technology professionals with the practical health information technology and informatics knowledge and skills needed in the development of a Nationwide Health Information Network of interoperable clinical and public health information exchanges

- The curriculum is developed in accordance with the CDC Core Competencies for Public Health Informatics
Continuing Education in Public Health Informatics

Targeted Audience

- State and Local Public health leadership
- Public health practitioners – END USERS!
- Healthcare workforce
- Information technology professionals
Program Implementation

Public Health Informatics Faculty

Current:
- Johns Hopkins
- ASTHO
- NACCHO
- PHDSC

To Be Invited:
- Academia
- CSTE
- HIMSS
- NAPHIT
- PHII
- Other

NACCHO Proposes Members of JPHIT LHD Practitioners
Program Implementation

2008 Curriculum

- Introduction to Public Health Informatics (INTRO)
- Public Health in Health Information Exchanges (HIE)
- Health Information Technology Standards (STDS)
- Visualization and Spatial Analysis of Public Health Data (VSA)
- Case Studies in Public Health Information Systems Integration (ISI)
Program Implementation

Certificate of Completion

• After completion of the course (attending all 8 sessions) attendees will receive the Certificate of <Course> Attendance/Completion

• In the future, we will work on obtaining formal certification of the Program, i.e., CME credits, AMIA 10x10, Public Health Continued Education Credits, etc.

• Attendees interested in academic credits could take the extended courses at Johns Hopkins University
New Partnerships = New Training Opportunities for LHDs!

- **American Medical Informatics Association (AMIA) Spring Congress**
  - Helped establish a Public Health Informatics Track
  - CDC/AMIA 10X10 Trainings for Public Health
- **Regional and Statewide Trainings**
- **2009 PHIN Conference**
Outputs: LHD Advanced Practices and Cutting Edge Public Health Informatics Approaches

A growing number of LHDs are working to advance the implementation of interoperable and secure health information systems, such that the practice of public health is enhanced and critical public health needs are comprehensively addressed through the better decision support and exchange of public health and health care information.

- Northern Virginia RHIO LHD participation
  - Fairfax County
  - Prince William County
  - Loudon County
  - Arlington County
- Cabarrus County (NC) Health Alliance
- Duvall County (FL) Health Department
- Long Beach (CA) Health Department
- Ingham County (MI) Health Department
- Lincoln-Lancaster County (NE) Health Department
- Denver (CO) Health Department
- Spokane (WA) Regional Health District
- And the list shall continue to grow!

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