

# A City/County Health Department Perspective

*Presented by*

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*at the*

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# City of Lincoln and Lancaster County, Nebraska



# Lincoln-Lancaster County Health Department

- ❖ Assures Health Care Access
- ❖ Controls communicable disease
- ❖ Supports dental health
- ❖ Provides health promotion and outreach
- ❖ Addresses environmental Public Health
- ❖ Performs community assessment, planning, and policy development
- ❖ Supports child and adolescent health
- ❖ Provides animal control

**PUBLIC** | Every One.  
**HEALTH** | Every Day.  
Every Where.



# Population-based versus Medical-driven Model

<b>Population-based Public Health</b>	<b>Medical-driven Model</b>
Population	Individual
Prevention	Diagnosis and treatment
Health promotion for the whole community	Care for the whole patient
Skills in assessment, policy development and assurance	Technical skills

# Public Health and Health Information Exchange: A Two-way Value Relationship

## Value added by PH:

- Obtains Individual patient information
- Makes mandated reporting more cost effective
- Increases accuracy of diagnoses in outbreak
- Facilitates chronic disease management
- Provides neutral management for chronic disease registries

## Value received by PH:

- Receives more timely disease reports
- Identifies gaps in preventive services more easily
- Performs analysis/display of distribution of illness or injury more easily
- Performs analysis/display of temporal/geographic epidemic spread more easily

Public Health Informatics Institute: “Public Health Opportunities in Health Information Exchange,” June 2005.



# Local Initiatives

- Community Health Information Network: an early effort to establish a local health information exchange in the 1990s. This was discontinued about four years ago due to lack of interest
- Public Health Information Network (PHIN): state and local health departments
- Disease registries
- Chronic Disease Initiatives
- Crash Outcome Data Evaluation System

# Requirements and Importance of EHR from a Local Perspective

- Must meet current and future state and federal requirements for data reporting and exchange
- Must accommodate long life expectancy for local applications
- Must make a sound business case for long-term usability
- Is critical to effective population-based public health

# Making RHIO Part of the Business of LPHA

- Adopt data standards
- Incorporate messaging and data elements standards into new system specifications
- Include state and federal integration requirements in business and workflow analyses
- Build capacity for electronic interface with PHIN and EHR systems at state/federal level

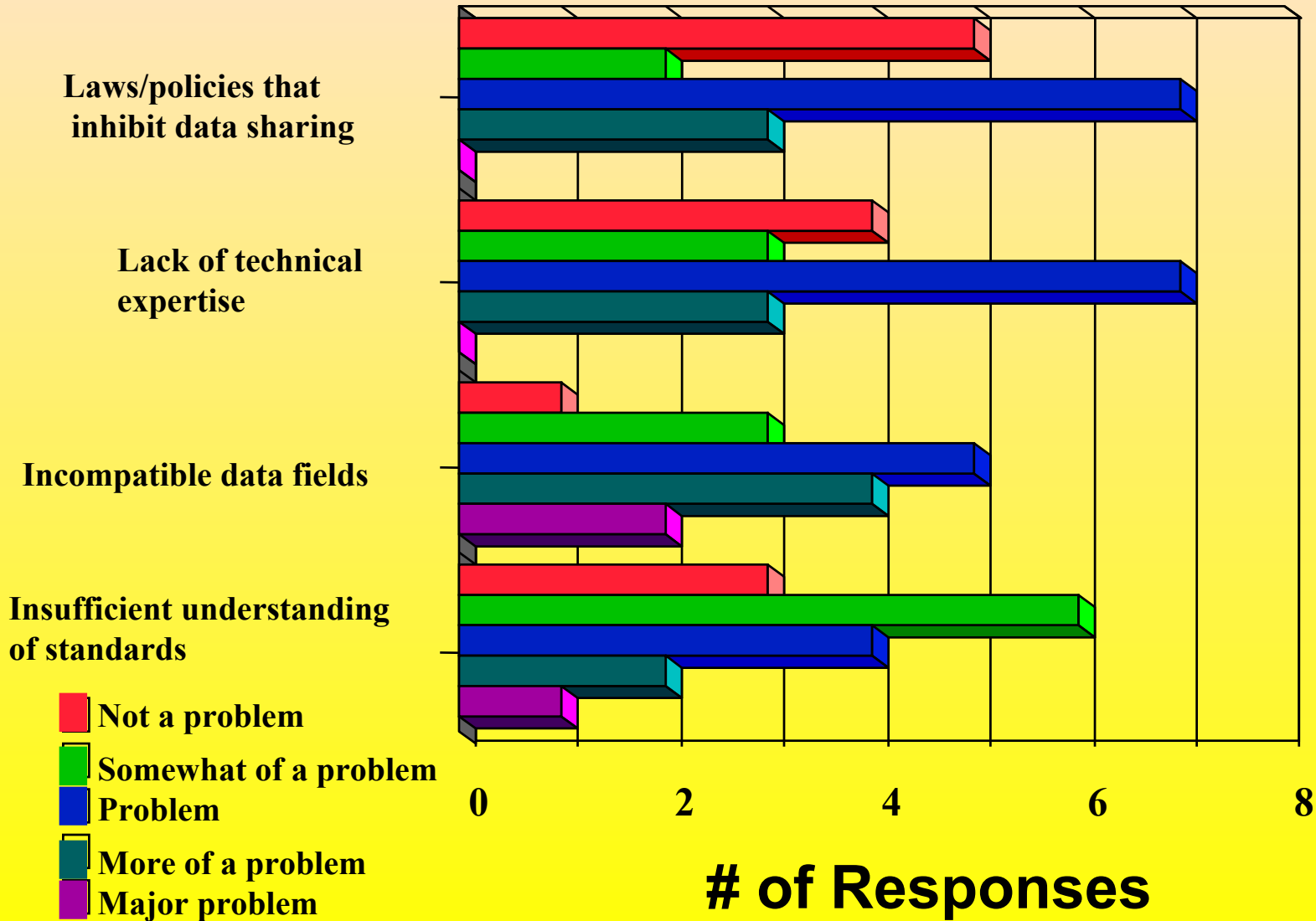


# Informatics Surveys of Local Health Departments

In 2003/2004, NACCHO partnered with the Public Health Informatics Institute to survey 23 local health departments regarding public health information systems. They found the following:

- 89% reported that system integration efforts are currently underway or highly likely in the next six to eighteen months
- 62.5% (10 out of 17) reported having major problems with integration efforts related to data standards

# Challenges to Integration of Information Systems Related to Data Standards



# Impact on the Business of My Local Health Department

- Strategic planning for IT
- Business case for system applications
- Workflow and business analysis
- Principles and protocols:
  - Data standards
  - Standard methodologies
  - Standard, off-the-shelf technology
  - Potential scalability
  - Document for the future
  - Ease of staff access and use

# A Local Example



Collaborative, community-wide initiative convened by the Health Department to improve health status in the community. Over 100 individuals currently working together from more than 25 key health agencies, including:

- Hospitals (all)
- Local Medical Society and local medical education foundation
- Local health foundation
- Grocery stores
- CIMRO of Nebraska
- Dental Association
- Local and state health department
- Lincoln Public Schools
- Homeless services
- Community action agency





Lincoln - Lancaster County Community  
**Diabetes Prevention**  
**LONG-RANGE OUTCOMES \* Logic Model**

**Purpose**

Improve the health and fitness levels of all within the City of Lincoln and in Lancaster County.

Improve the longevity and quality of life for all persons within the City of Lincoln and in Lancaster County with or without diabetes.

**Live Long and Prosper!**

**Activities**

Take ACTION NOW! to promote regular daily physical activity and optimal nutrition status.

Take ACTION NOW! to change the local environment to one that encourages healthy eating and physical activity: for example, through policies, behaviors, social norms, habits, environmental characteristics, *et cetera*.

Take ACTION NOW! to expedite diabetes prevention, especially among vulnerable and at-risk populations.

Take ACTION NOW! to decrease the number, proportion, and severity of health consequences of diabetes.

Celebrate every community victory that shows that we are reducing the burden of diabetes within the City of Lincoln and in all of Lancaster County.

*Outcome*

- Decrease in the number and proportion of people with pre-diabetes who go on to develop diabetes.

- Decrease in the costs of diabetes.

- Decrease in adverse health disparities between majority and minority populations' experiences with diabetes.

- Decrease in sentinel events, such as premature death, amputations, heart surgeries, blindness, dialysis, and other disabilities from diabetes.

# A Local Example



Purpose	Activities						Outcome
3. Utilize Data and Research	3.1 Identify available data/ research – local, state, national.	3.2 Review data/ research basis for action and adjust strategies accordingly.	3.3 Assess and address data/ research gaps.	3.4 Identify or create communication links among partners for data sharing.	3.5 Identify or collect baseline data against which to measure outcomes.	3.6 Collect, analyze, and disseminate data/ research findings and outcomes.	<ul style="list-style-type: none"> <li>• Ongoing data/ research review utilized for strategic development.</li> <li>• Data/research gaps addressed.</li> </ul>

A Local Example



# Limitations due to Lack of Health Information Exchange

- Tracking outcomes and evaluating impact of interventions
- Assessment of incidence of chronic disease
- Ability to measure the impact of behavior, economic and social change strategies

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