# Leveraging the Electronic Health Record for Public Health Alerting

Clinician Outreach and Communication Activity (COCA)
Conference Call

Tuesday, June 22, 2010



### **TODAY'S PRESENTER**



Nedra Garrett, MS
Acting Director
Division of Informatics Practice,
Policy & Coordination - CDC



## Objectives

At the conclusion of this hour, each participant should be able to:

- Discuss the public health benefits of Electronic Health Record Systems
- Identify the types of information in Electronic Health Record Systems that can be leveraged for alerting
- Describe conditions most suitable for alerting in Electronic Health Record Systems

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# Leveraging the Electronic Health Record for Public Health Alerting

Clinician Outreach and Communication Activity (COCA) Conference Call

Nedra Garrett, MS
Office of Surveillance, Epidemiology & Laboratory Services
(proposed)
Public Health Informatics & Technology Program Office (proposed)
June 22, 2010



## Agenda

- Overview of EHR Alerting
- Example Scenario
- Key Components of EHR Alerting Solution
- Public Health Conditions Suitable for Alerting
- Public Health-Clinical Value Add
- Next Steps



## Health IT as a Source of Public Health Information

- Health IT & the EHR fundamentally change the availability of clinical information for public health
  - Timely access to specific information
  - Electronic availability is a byproduct of standard clinical practice
- Utility of Health IT is dependent upon the availability of that information nationally and globally

Must maintain patient privacy.

Must provide incentives for healthcare to take part.

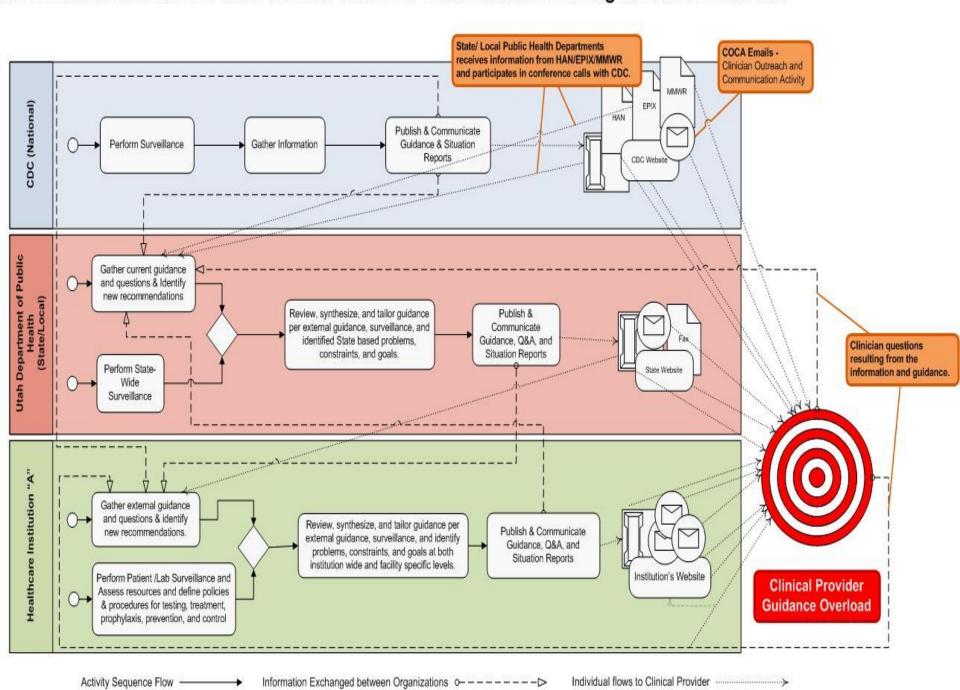


## **Project Objectives**

- To demonstrate the ability of a public health agency to generate an 'actionable' public health alert that can be consumed by an EHR system
- To demonstrate the effectiveness of a public-private collaborative to advance the practice of public health in the medical setting using non-traditional partners testing the capability in both commercial and open electronic health record systems
- ▼ To determine if EHR data can be leveraged to identify specific patients with risk factors related to the health condition identified in the alert
- ▼ To demonstrate the transmission & integration of public health information into the clinical workflow
- To evaluate the impact using qualitative approaches on clinicians' behaviors



#### Alert Guidance from US Public Health Entities to Utah Clinicians During the H1N1 Outbreak



## Information Exchange



HITSP T81
Communication
Standard

Public Health Alert Repository



How can providers be alerted of outbreaks relevant to their patient at the time of care?



Patient presents to clinic exhibiting headache, fever, & severe respiratory symptoms

States/CDC monitoring public health identify a H1N1 outbreak





#### **Public Health Considerations**

- Dynamic in nature
  - Urgency
  - Multiple alerts, same problem
  - Changing landscape of problem e.g. new cases, new locations
- Scope of information
  - Population vs. patient specific
- Multi-stakeholder response/involvement
  - CDC, State & Local Health Departments
  - Healthcare Providers
  - Other federal agencies e.g. FDA



### **Clinical Considerations**

- Information Needs e.g. H1N1
  - Patient Specific Recommendation
  - General Recommendation
  - Prioritization
  - Special populations
  - What's New & Different
- Presentation of Information
  - DSS, Infobutton Manager
  - Public Health Importance Indicator?
  - Alert Fatigue



## **EXAMPLE SCENARIO**



# **Medical Community**

## Public Health EHR Alerting Flow

H1N1 Outbreak Identified

H1N1 Message Created Knowledge Repository



States/CDC monitoring public health discover H1N1 outbreak





#### Rule based Alerts

#### H1N1:

Symptoms
Locations
Event Information
Guidance e.g. travel
history, contact
exposure

An extension of the knowledge repository, alerts will be stored to assist in biosurveillance



H1N1 message sits on a standalone knowledge repository or on a PH grid

> Rule Based Public Health profile matching

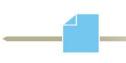
#### **Providers Desktop**

#### Providers Seeing Patients

As part of their workflow providers poll for messages when seeing patients and click the info button for more detail.



#### **Infobutton Request**



Hospital

HIE

COE

EHR+

OpenMRS

MD Office INTL Healthcare Facility

Citizen

PHR WWW Context based request using standardized, anonymous case data.

- User context
- User action
- · Patient record content

EMR decision support algorithms envoked

Rule Based Public Health alert information to CIS providing decision support objects (text for display), order sets, etc)

## "EHR-Friendly" Alert Message

#### H1N1 Alert Message Message ID 264803

#### **Event Summary:**

CDC, in collaboration with public health officials in Georgia and Florida is investigating cases of febrile respiratory illness caused by swine influenza (H1N1) viruses. As of 1 pm on August 6th, 2009, 5 laboratory confirmed cases of Swine Influenza infection have been confirmed in the United States.

#### **Symptoms**

Cough

**Fever** 

Chills

Congestion

**Patient Demographics** 

Age: All

**Gender: All** 

Race: All

**Jurisdictions** 

30369

32628

#### Recommendations

See <a href="http://www.cdc.gov/h1n1flu/quidelines">http://www.cdc.gov/h1n1flu/quidelines</a> infection control in health care settings

Visit <a href="http://www.cdc.gov/h1n1flu/guidance-homecare.htm">http://www.cdc.gov/h1n1flu/guidance-homecare.htm</a> for more information on caring for sick persons in the home.

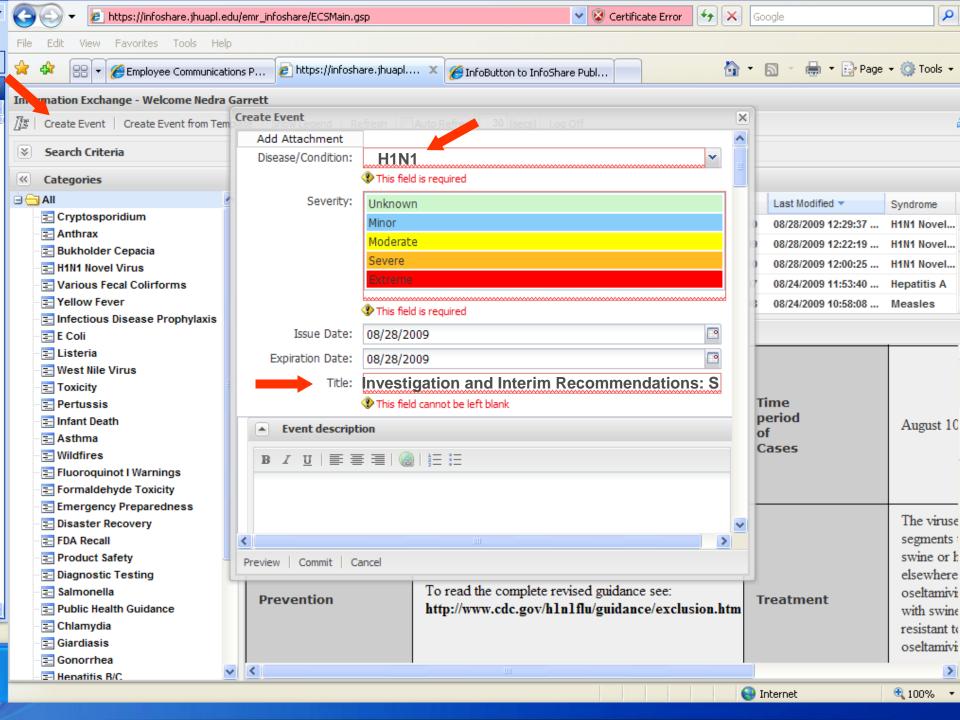
Visit http://www.cdc.gov/h1n1flu/qa.htm questions and answers about H1N1 influenza.

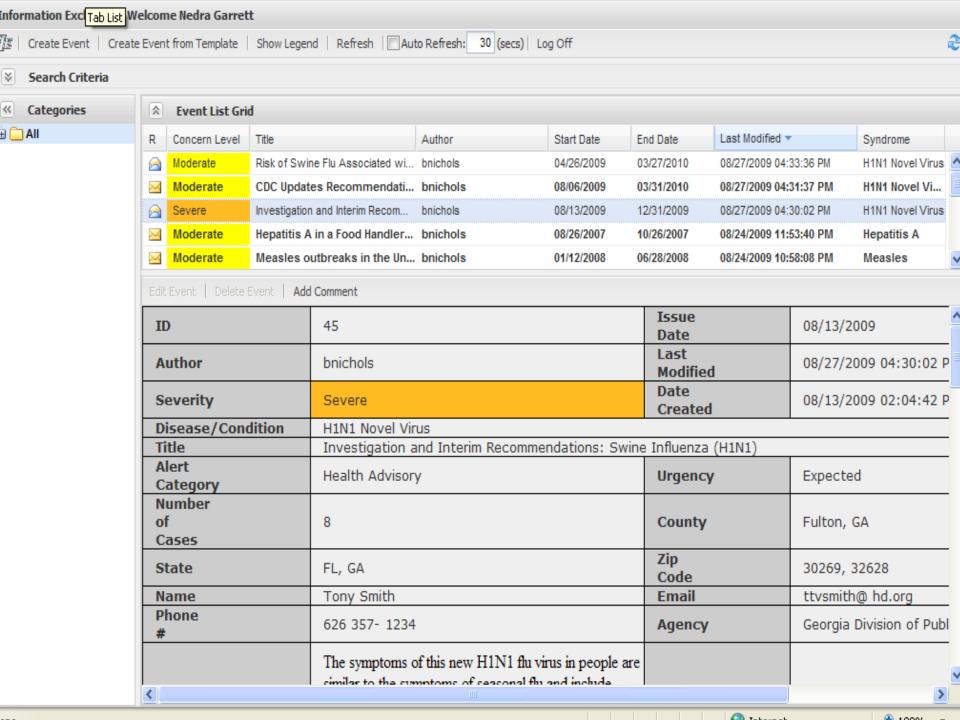
An example of information taken from biosurveillance efforts to author an alert in the alert repository



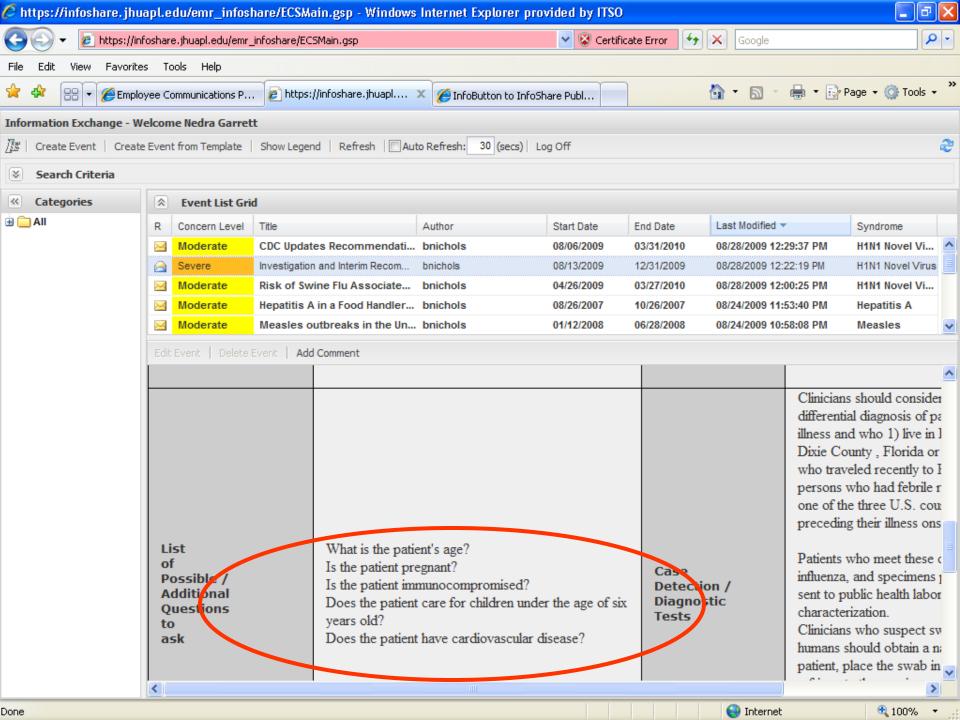
Date of Last Update: 08/27/2009 Ex

Expiration Date: 11/01/2009

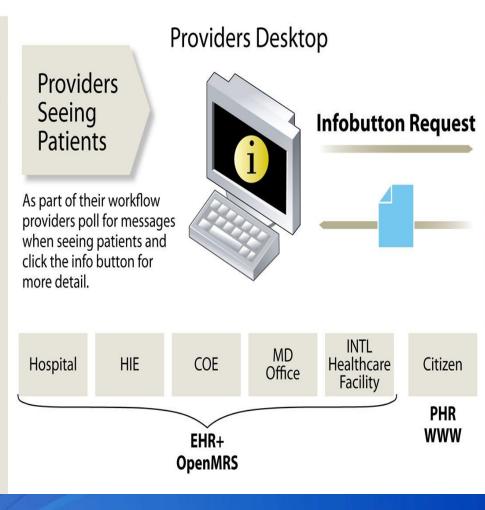




Emilobattori to miosnare Papi					
formation Exchange - Welcome Nedra Garrett					
F .	Create Event   Create Event from Template   Show Legend   Refresh   Auto Refresh: 30 (secs)   Log Off				
8	Search Criteria				
<b>▼</b> Event List Grid					
	Edit Event   Delete Event   Add Comment				
	Symptoms	The symptoms of this new H1N1 flu virus in people are similar to the symptoms of seasonal flu and include fever, cough, sore throat, runny or stuffy nose, body aches, headache, chills and fatigue. A significant number of people who have been infected with this virus also have reported diarrhea and vomiting. Also, like seasonal flu, severe illnesses and death has occurred as a result of illness associated with this virus.	Time period of Cases	August 10, 2009 to August 28, 2009	
	Prevention	To read the complete revised guidance see: http://www.cdc.gov/hlnlflu/guidance/exclusion.htm	Treatment	The viruses contain a unique combination of gasegments that have not been reported previous swine or human influenza viruses in the U.S. or elsewhere. At this time, CDC recommends the oseltamivir or zanamivir for the treatment of int with swine influenza viruses. The H1N1 viruse resistant to amantadine and rimantadine but no oseltamivir or zanamivir.	
	<	Report any positive findings to your local health		Persons with febrile respiratory illness should serion work or school to avoid spreading infect (including influenza and other respiratory illness others in their communities. In addition, freque washing can lessen the spread of respiratory il	
ne 😜 Internet 🔍 100% ▼					



## **Distribute Alert**





Context based request using standardized, anonymous case data.

- User context
- User action
- Patient record content

EMR decision support algorithms envoked

Rule Based Public Health profile matching Knowledge Repository

Rule Based
Public Health
alert information to
CIS providing decision
support objects
(text for display,
order sets, etc)



Salmonella message sits on a standalone knowledge repository or on a PH grid

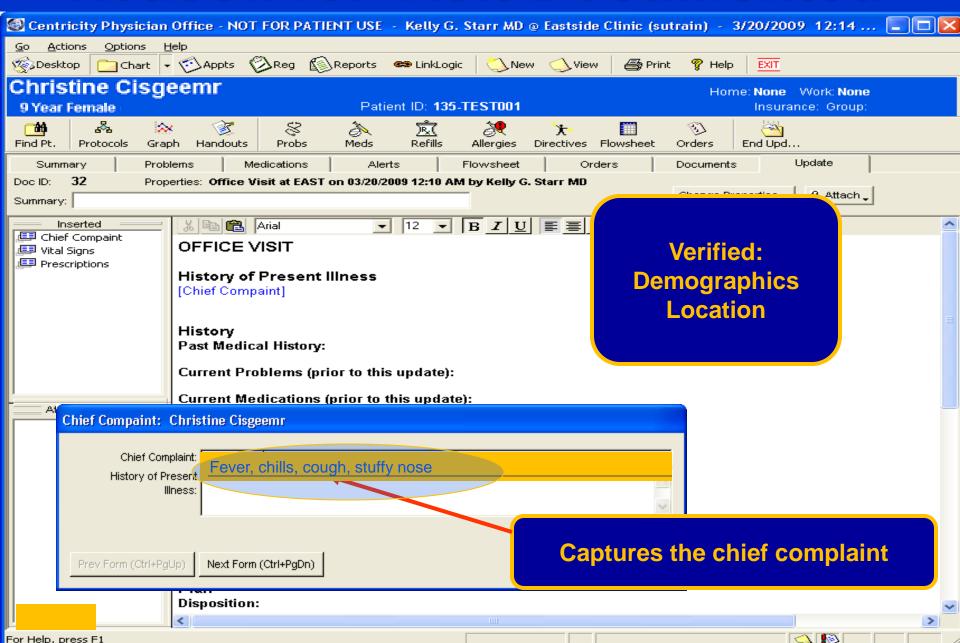
### Patient Presents to Clinic

- Christine Cisgeemr, a 9 year healthy child develops a fever, chills, cough and stuffy nose.
- Christine arrives at the local urgent care center and information is provided to the reception which is entered into the EHR system.

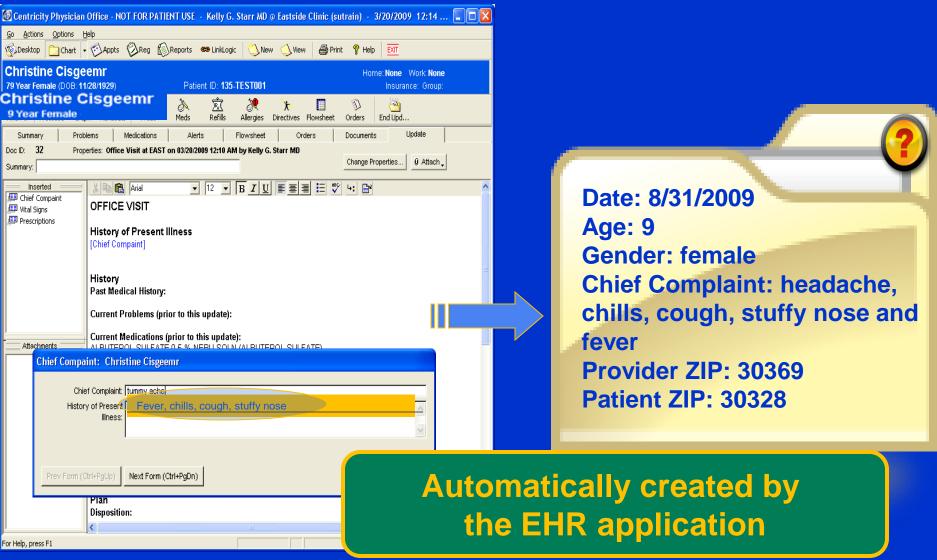




### Reason for Visit Documented



## **Anonymous Patient Profile**





## **Profile Sent to Alert Repository**

Date: 8/31/2009

Age: 9

**Gender:** female

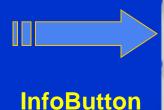
Chief Complaint: headache,

chills, cough, stuffy nose and

fever

Provider ZIP: 30369

Patient ZIP: 30328



nfoButtor Standard (T81)



Automatically sent to the alert repository



## **Algorithms Match Information- H1N1**

#### **EHR Anonymous Profile**

H1N1 Alert Message -- ID 264803 Message --ID 26329 **Event Summary:** CDC, in collaboration with public health officials in Georgia and Florida is investigating cases of febrile respiratory illness caused by swine influenza (H1N1) viruses. As of 1 pm on August 6th, 2009, 5 laboratory confirmed cases of Swine Influenza infection have been confirmed in the United States. Chief **Symptoms** Complaints Cough match Cough match **Fever Fever** match Chills Chills Stuffy nose match Congestion Patient Demographics **Patient Demographics** Age: All match Age: 79 Gender: All match Gender: female match Race: Caucasian Race: All Jurisdictions **Jurisdictions** 30369 match **Patient** match Jurisdiction: 30369 guidance on infection control in health care settings **Provider** information on caring for sick persons in the home. Jurisdiction: http://www.cdc.gov/h1n1flu/ga.htm guestions and answers about 30328 H1N1 influenza.

#### H1N1 Alert Message Message ID 264803

#### **Event Summary:**

CDC, in collaboration with public health officials in Georgia and Florida is investigating cases of febrile respiratory illness caused by swine influenza (H1N1) viruses. As of 1 pm on August 6th, 2009, 5 laboratory confirmed cases of Swine Influenza infection have been confirmed in the United States.

#### Symptoms Cough

**Fever** 

Chills

Congestion

## Relevant Alerts Downloaded to EHR

Go Actions Options Help

Christina Ciengamr

9 Year Female

Find Pt.

Doc ID:

Summary:

Summary

Christine Cisgeemr

Protocols Graph Handouts

Problems

#### **Patient Demographics**

Age: All

**Gender: All** 

Race: All

**Jurisdictions** 

30369

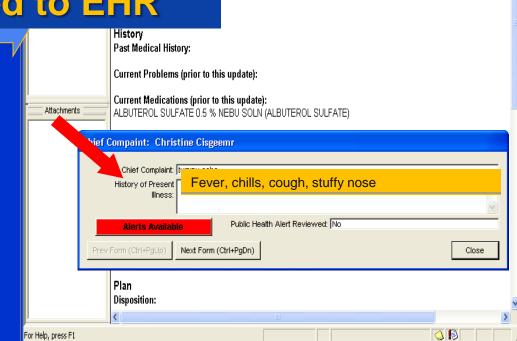
32628

#### Recommendations

See

http://www.cdc.gov/h1n1flu/guidelines infection control.htm for guidance on infection control in health care settings
Visit http://www.cdc.gov/h1n1flu/guidance homecare.htm for more information on caring for sick persons in the home.
Visit http://www.cdc.gov/h1n1flu/ga.htm guestions and answers

about H1N1 influenza.
Date of Last Update: 08/27/2009 Expiration Date: 11/01/2009



Centricity Physician Office - NOT FOR PATIENT USE - Kelly G. Starr MD @ Eastside Clinic (sutrain) - 3/20/2009 12:14 ...

Flowsheet

Allergies Directives Flowsheet

▼ 12 ▼ B I U E ≣ ≣ E ♥ 나: 🖦

Orders

Home: None Work: None

End Upd...

Orders

Documents

Change Properties.

Insurance: Group:

Update

@ Attach\_

Meds

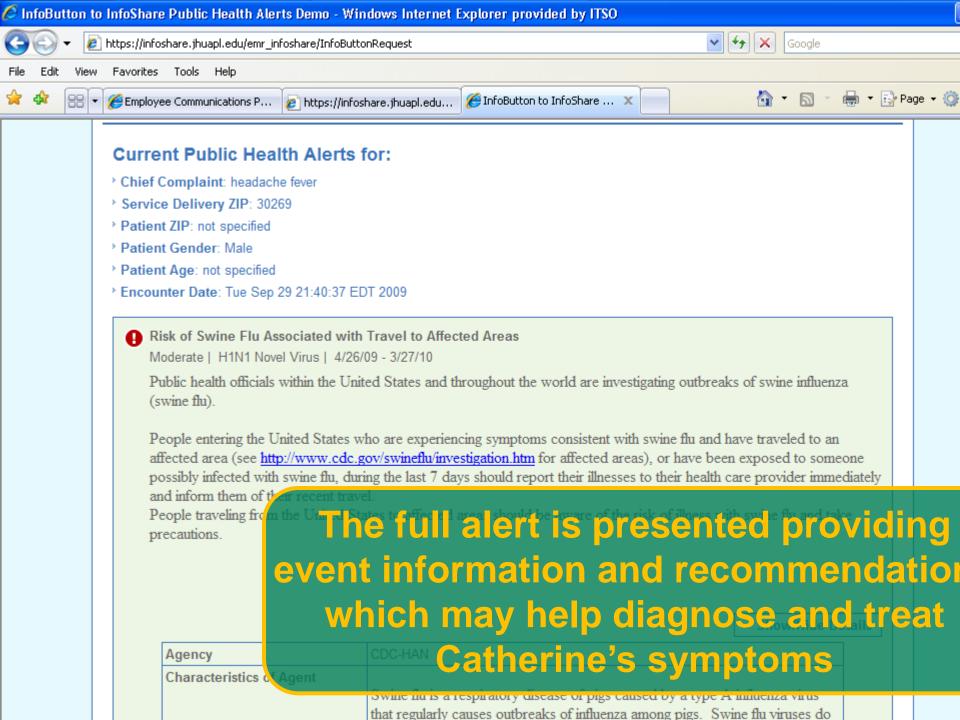
Properties: Office Visit at EAST on 03/20/2009 12:10 AM by Kelly G. Starr MD

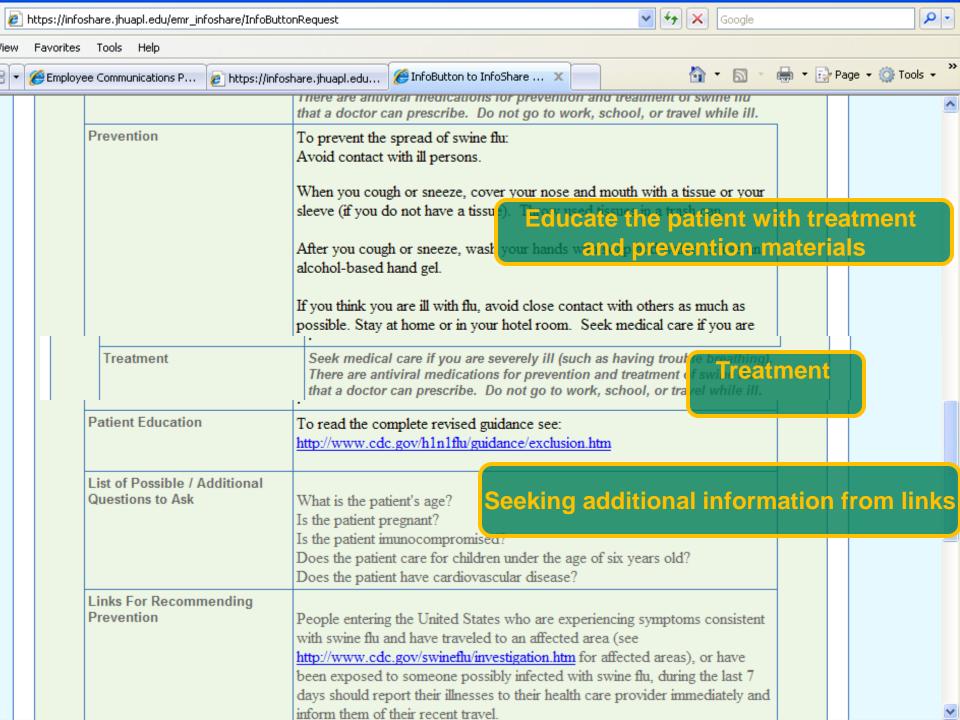
Medications

Arial

Patient ID: 135-TEST001

Refills





### **Provider Accesses Alert**



Provider clicks on alert button

A summary of the alert appears

DCDC Updates Recommendations for the Amount of Time Persons with Influenza-Like Illness should be Away from Others

Moderate I H1N1 Novel Virus I 8/6/09 - 3/31/10

On August 5, 2009, CDC changed its recommendation related to the amount of time people with influenza-like illness should stay away from others (the exclusion period). New guidance indicates that people with influenza-like illness should stay home for at least 24 hours after their fever is gone (without the use of fever-reducing medicine). A fever is defined as having a temperature of 100° Fahrenheit or 37.8° Celsius or greater.

This is a change from the previous recommendation that ill persons stay home for 7 days after illness onset or until 24 hours after the resolution of symptoms, whichever was longer.

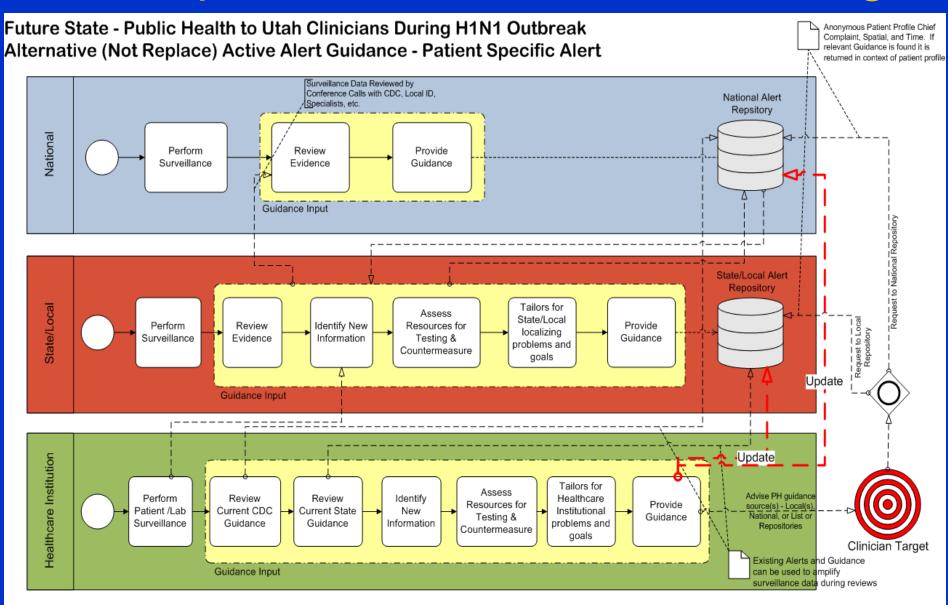
The new recommendation applies to camps, schools, businesses, mass gatherings, and other community settings where the majority of people are not at increased risk for influenza complications. CDC recommends this exclusion period regardless of whether or not antiviral medications are used. This guidance does <u>not</u> apply to health care settings where the exclusion period continues to be for 7 days from symptom onset or until 24 hours after the resolution of symptoms, whichever is longer.



+ Show/Hide Details

Provider click the show/hide details to view more information

## **Example of Future State of Alerting**



➤ Message to External Organization o— — — — — — — —

## Public Health Conditions Suitable for Alerting in EHR Systems

Generally require patient specific information e.g. demographics, geography, chief complaint, reason for visit, occupation, travel history

- Interim Recommendations for the Use of Influenza Antiviral Medications
- Temporary Decrease in Human Rabies Vaccine Supplies
- Potential for Dengue Infection Among Relief Workers
   Returning from Haiti
- Foodborne Diseases (Salmonella, E.coli )
- Potential Cases of Mumps During a Multi-State Outbreak
- Legionnaires' Disease
- Screening high risk persons (TB, STDs, Mammography, etc.)

#### Public Health - Clinical Value Proposition

- Opportunity to improve dissemination of public health information at point of care
- Opportunity to increase compliance with public health recommendation and guidelines
- Opportunity for more timely patient specific information
- Opportunity for public health to take advantage of information afforded by EHR systems

#### Value Proposition (cont.)

- What are key indicators of activities associated with communicating alert information would measure contribution for public health and the clinical community
  - Alert creation, distribution, etc.
  - Finance, quality, efficiency, information and data reliability & availability, effectiveness, security & privacy, innovation, productivity, and/or management, etc.



## **Next Steps**

- Pilot the integration of alerts in EHR system in ambulatory setting
- Evaluate for extensibility for other domains
- Continued involvement in national Health IT efforts



# Contact: Nedra Garrett ngarrett@cdc.gov

For more information please contact Centers for Disease Control and Prevention

1600 Clifton Road NE, Atlanta, GA 30333

Telephone, 1-800-CDC-INFO (232-4636)/TTY: 1-888-232-6348

E-mail: cdcinfo@cdc.gov Web: www.atsdr.cdc.gov



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#### Thank you for joining the call-Please email us questions at coca@cdc.gov

