



INTERNATIONAL SOCIETY  
FOR DISEASE SURVEILLANCE

February 6, 2015

Dr. Karen DeSalvo  
Office of the National Coordinator for Health Information Technology  
U.S. Department of Health and Human Services

RE: Federal Health IT Strategic Plan, 2015 – 2020

Dear Dr. DeSalvo,

The International Society for Disease Surveillance (ISDS) is a 501(c) 3 nonprofit organization founded in 2005 and dedicated to the improvement of population health by advancing the science and practice of disease surveillance. The ISDS Executive Director and Board of Directors have reviewed the Federal Health IT Strategic Plan 2015-2020 (FHITSP) and have the following comments:

**Introduction: Overview (p. 4): Definition of Health IT**

In the overview section, health IT is defined as including “a wide range of products, technologies, and services, such as electronic health records (EHRs), mobile and telehealth technology, cloud-based services, medical devices, and remote monitoring devices, assistive technologies, and sensors.” We would like to stress that this definition should explicitly include mention of public health IT systems, such as outbreak management systems, disease surveillance systems and registries so that readers are clear from the introduction that public health is a key player in the health IT space. Public health IT systems are essential components in improving and protecting people’s health and well-being as explained in this strategic plan, in the National Strategy for Biosurveillance ([http://www.whitehouse.gov/sites/default/files/National\\_Strategy\\_for\\_Biosurveillance\\_July\\_2012.pdf](http://www.whitehouse.gov/sites/default/files/National_Strategy_for_Biosurveillance_July_2012.pdf)) and in the Centers for Disease Control and Prevention’s Surveillance Strategy (<http://www.cdc.gov/ophss/docs/cdc-surveillance-strategy-final.pdf>).

**Objective 1A: Strategy 2; Objective 1A: Strategy 3; Objective 2B: Workforce Development**

Public health agencies have made tremendous strides in advancing the practice of disease surveillance with very limited funding and diminishing staff resources. As public health agencies are a key partner in realizing the vision outlined in the FHITSP, federal initiatives that aim to increase the public health informatics workforce are essential. ONC should strongly support and encourage the expansion of initiatives like the SHINE fellowships (<http://shinefellows.org/>), which have shown tremendous success; graduates of this program have made significant contributions to the ISDS community of practice. A larger public health informatics workforce would allow public health agencies to leverage health IT more effectively (Objective 1A: Strategy 2, Objective 2) and to contribute more fully to the development of technical guidance, standards and best practices of health IT for the exchange of data between public health and clinical care (Objective 1A: Strategy 3, Objective 2B).

### **Objective 3C: Improve clinical and community services and population health**

Public health agencies are vital in meeting the needs of vulnerable and underserved populations. ISDS applauds the efforts of ONC to encourage partnerships and collaborations among public and private entities to improve access to preventive and social services and to foster patient-centered care. In order to facilitate public health's role in this endeavor, ONC should encourage federal support of projects that reduce "siloes" public health IT systems and enable enterprise level approaches at state and local agencies. Enterprise-level systems in public health agencies will streamline communications within the various sections of social services and public health as well as with these agencies and private providers.<sup>1</sup>

### **Objective 4B: Advance the Health and Well-Being of Individuals and Communities**

As described in Objective 4B, public health entities need improved technical and administrative infrastructures in order to leverage the increasing volume of health information received. Backlogs in the timely receipt of data from clinical settings are created when public health does not have enough funds to upgrade IT systems and/or to hire additional staff to work with providers to achieve ongoing submission of data. Public health's ability to detect and respond to public health threats is hampered by a lack of funding. ONC should encourage additional funding for public health IT in order to realize the goals outlined in the FHITSP.

### **Objective 5A: Increase access to and usability of high-quality electronic health information and services**

A key mission of ISDS is fostering collaborations among public health practitioners, researchers and private industry to advance the science and practice of disease surveillance. We strongly support the efforts described in the FHITSP to make federal data available to outside parties to encourage the development of tools that lead to improvements in health. State and local public health agencies have datasets of tremendous interest and value to researchers and informatics innovators, but they are often unable to develop appropriate means of data dissemination that adhere to state and federal statutes. ONC should include state and local public health agencies in these data dissemination discussions and should support pilot projects that create de-identified, realistic datasets that can be used by researchers to develop innovative solutions for public health surveillance. ISDS facilitates similar efforts through its Technical Conventions Committee (<http://www.syndromic.org/committees/technical-conventions>), but this is a small volunteer effort. Access to state and local public health surveillance datasets by researchers is a huge challenge that ONC could assist in solving.

Sincerely,



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ISDS President and Board Chair



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<sup>1</sup> Mirza N, Reynolds T, Coletta M, et al. Steps to a Sustainable Public Health Surveillance Enterprise A Commentary from the International Society for Disease Surveillance. *Online Journal of Public Health Informatics* 2013;5(2):210. doi:10.5210/ojphi.v5i2.4703.