



- HIMSS Nicholas E. Davies Public Health Award of Excellence –

The Nicholas E. Davies Award of Excellence for Public Health is awarded to a state, local or tribal public health program that has improved the health of a defined community through health information management. Since 2004, the Davies Public Health Award has recognized 11 public health entities.

Defining Public Health Information Systems Value

The American Recovery and Reinvestment Act of 2009 will change the delivery of healthcare in the United States. Designed to stimulate the economy via job creation, the law's proponents expect widespread adoption and use of IT in healthcare, and measurable progress towards making interconnected healthcare a reality. Public Health Information Systems (PHIS) should result in improved early sentinel awareness, more comprehensive disease surveillance and reporting, and appropriate intervention in a more timely manner. These PHIS are essential components of a comprehensive health information technology (IT) solution. Continued development of these systems is a critical component of broader health IT innovation.

- Traditional cost-benefit analysis is a challenge for PHIS.
 - Cost is often shared by the government.
 - True value is harnessed in the impact the system has on the improvement of population health, including control and containment of disease.
 - Population health monitoring cannot be done solely by public health entities. Effective bidirectional surveillance and intervention require partnerships with healthcare providers. This collaboration requires significant upfront investment, bringing value to the population, but an extra cost to absorb by providers.
 - All response is local, though regional and federal data integration is essential to early sentinel awareness. Consequently, coordination among federal and state entities as well as providers at the point of care is vital for effective development of health IT. Examples include:
 - Nationwide food recalls require coordination for effective detection and tracking:
 - February 4, 2009 - Recall of Peanut-Containing Products:
Salmonella typhimurium
<http://www.fda.gov/oc/opacom/hottopics/Salmonellatyp.html>
 - January 5, 2009 – Melamine Contamination in China
Asian communities in the US, warned of potential risks of infant formula manufactured in China
<http://www.fda.gov/oc/opacom/hottopics/melamine.html>



Common Themes of Public Health Information Technology Impact

- Standards development and implementation - need for funding at national level to create a more efficient, interoperable system
 - Improved data exchange opportunities between state labs and public health would improve utilization of health IT for better outbreak detection and overall surveillance.
 - Similarly, data exchange between hospital and clinic electronic medical record systems requires leadership and funding at the national and state levels to support standardization efforts. Timely, standardized data exchange is essential for improved surveillance, outbreak detection and monitoring of emerging diseases.
- Electronic disease surveillance systems
 - Integrate with electronic health records (EHRs) at the point of care
 - Increase providers' abilities to recognize potential problems as soon as possible
 - Detect outbreaks quickly to minimize morbidity and contain the spread
 - Better coordinate /integrate the use of and access to information across all health departments through a streamlined approach
 - Aggregate historical data to facilitate disease trend analysis
 - Provide an all-hazards approach by eliminating silos of data
- Biosurveillance – using real time pre-existing, pre-diagnostic and diagnostic data to detect and respond to all types of hazards as quickly as possible
 - Real-time electronic event detection decreases the burden on health staff and hospitals and improves public health outcomes
 - Situational awareness: rapid characterization of natural and man-made events provides more timely data leading to more effective control and disease containment and response efforts, as well as overall decision-making on public health prevention programs and policies
 - Flexibility to track emerging threats; impacts of natural disasters
- Population health impact on EHRs
 - EHRs allow providers and public health officials to target prevention and care resources to highest risk populations
 - Provide continuity of care during disaster response
 - Access to chronic disease information
 - Access to medication information
 - Data analyses from biosurveillance systems, disease surveillance systems and EHRs can facilitate quality improvements at provider, county, state and national levels; ability to look at/study co-infections
 - Improve data quality and consistency significantly improves public health professionals and providers abilities to understand disease
 - Better data allow public health policies and prevention activities to be better directed to those at most risk, improving health equity



2008 Davies Public Health Award

- Cherokee Indian Hospital Authority (CIHA) – Cherokee, NC
- New Jersey Department of Health and Senior Services (NJDHSS), Communicable Disease Services – Trenton, NJ

2007 Davies Public Health Award

- Illinois - National Electronic Disease Surveillance System (I-NEDSS) – Springfield, IL
- Institute for Family Health – New York, NY

2006 Davies Public Health Award

- Behavioral Health Integrated Provider System (BHIPS) – Austin, TX
- New York State Environmental Public Health Tracking Network (NYS EPHTN) Data Exchange System – Albany, NY

2005 Davies Public Health Award

- Indian Health Service Clinical Reporting System – Warm Springs, OR
- North Carolina Disease Event Tracking and Epidemiologic Collection Tool (NC DETECT) –Chapel Hill, NC (see http://www.himss.org/ASP/davies_publichealth.asp for video interview)

2004 Davies Public Health Award

- Pennsylvania's National Electronic Disease Reporting System (PA-NEDSS) – Harrisburg, PA
- South Dakota Electronic Vital Records and Screening System – Pierre, SD
- Utah Statewide Immunization Information Station, Utah Department of Health – Salt Lake City, UT

For more information, please visit www.himss.org/davies/pastRecipients_ph.asp