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Digital Bridge: eCR Status Update

CONFIRM MEETING DATE

Building the Bridge: Visioning Session – June 2016 | Executive Summary

Statement of Purpose

Key stakeholders in the digital health care and public health community came together for a 2-day immersive experience in June 2016 to collaborate on a vision for digital health data exchange and a proof-of-concept for Electronic Case Reporting to improve the health, well-being and security of the nation.

AGENDA



Envisioning the Bridge

Welcome and set the stage

Build a shared understanding around the facts and constraints

Shape an understanding through 3 user stories

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Laying a Foundation for Success – eCR Proof of Concept

Affirm for the need and purpose of an eCR proof of concept by further defining the proof of concept

Further define the proof of concept approach



Charting the Path Forward

Create the notional timeline

Reflections

Select a tool and closing thoughts

SESSION PARTICIPANTS

Participant Type	Organization
EHR Vendors	Epic
	Cerner
	Meditech
	eClinicalWorks
	AllScripts
Care Delivery Networks	Kaiser Permanente
	HealthPartners
	Partners
	Nebraska Medical Center
Public Health	CDC
	APHL
	NACCHO
	CSTE
	ASTHO
Program Support	Robert Wood Johnson Foundation
	Public Health Informatics Institute
	Deloitte

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Reflections

- Our vision: we will work together to improve the health of our nation by creating a bi-directional exchange of health information between public health and healthcare
- While the group identified many challenges, there was overall optimism that the vision can be accomplished
- This is not a technical challenge, it is a matter of governance, will, and resources
- The process will move forward with active, timely, and broad stakeholder engagement
- Our governance body will include representatives from public health, providers, and vendors. It will be enhanced and refined as we move forward

- The first phase, testing implementation, will be complete by July 1, 2017 with a range of jurisdictions, vendors and delivery systems
- Both the governance and technical solution will be built to evolve
- Definitive commitments were made by participants that will move the ball forward
- We will start with notifiable disease data
- Our work will build on work already done by others
- We have a high level work plan to guide our efforts
- This is an historic convening of all three stakeholder groups that will result in a sustained effort over time

Digital Bridge: The Digital Intersection of Health Care and Public Health

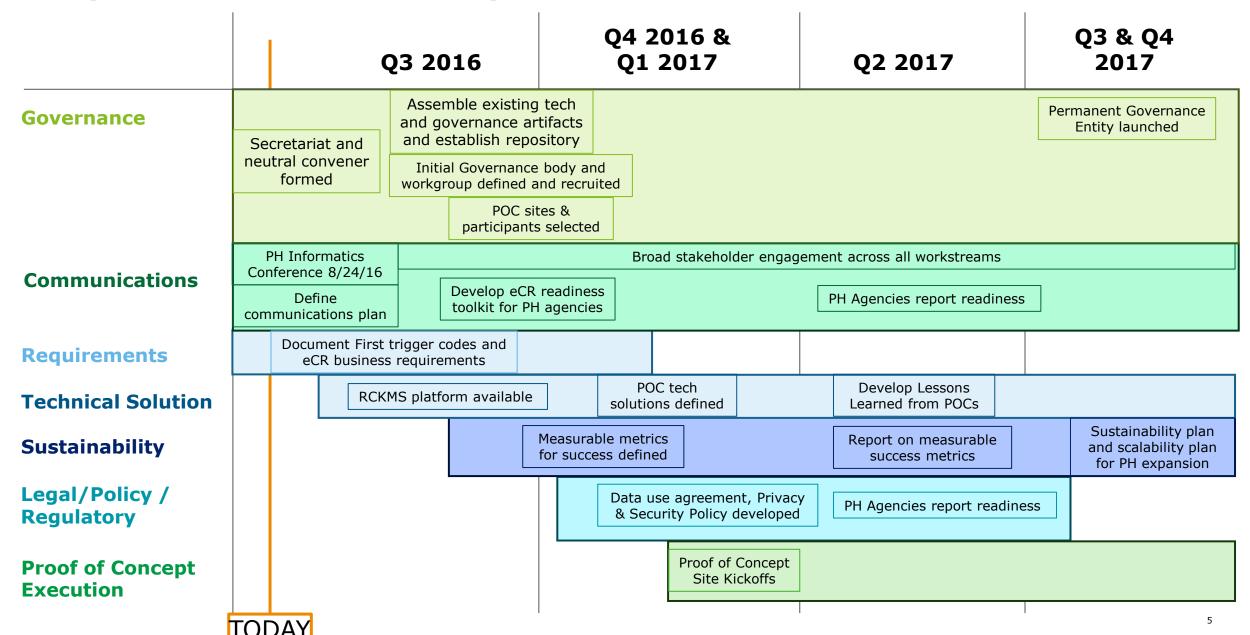
Our Vision:

We will work together to improve the health of our nation by creating a bi-directional exchange of health information between public health and healthcare.

Key Accomplishments and Milestones

- Convened initial meeting of EHR vendors, care delivery networks, and public health stakeholders 6/11/2016
 - Consensus obtained on goal and objectives
- Established initial Governance Body, and defined needed workgroups 9/8/2016
 - Approved governance rules
 - Began seeking complete information on background and previous efforts in electronic case reporting and health informatics transmission
- Established and convened Requirements working group 9/15/2016
 - Developed strawman requirements to be finalized by the requirements working group

Proposed eCR Proofs of Concept Timeline



Appendix

Working Group Structure

Initial Working Groups



What should these groups look like?

- Working groups should consist of between 5 and 10 members.
- All members must be willing to make substantial time commitments for the next 6-12 months and possibly beyond.
- Logistical support and project management will be provided for the working groups.
- Working groups will be encouraged to obtain input from across all 3 communities—Public Health, Delivery Systems, and Vendors—as necessary to accomplish their work.
- All work product will be public, and members should expect to have responsibilities for consistent external communication.

Rules of the Road for Working Groups

Requirements

Scope Statement:

 The Requirements working group will identify the reportable conditions and the trigger codes for those conditions, along with the core data to be transmitted and received.

Rules of the Road:

- Membership will be drawn from all 3 communities.
- There will be one set of trigger codes, to be maintained by public health.
- Care Delivery Systems will have the opportunity to identify what is feasible for them to implement.
- Working group members should meet twice a month.

Technical Solution

Scope Statement:

 The Technical Solution working group will develop the technical solution for sending and receiving data with input solicited from the community of practice as needed.

· Rules of the Road:

- Membership will consist of approximately 5 invited vendors and 1 member each from Public Health and Delivery System communities.
- It is anticipated that the working group will obtain input from a variety of sources.
- Working group members should meet twice a month.

Sustainability

Scope Statement:

 The Sustainability working group will develop a selfsustaining business model for bi-directional exchange.

Rules of the Road:

- Membership will be drawn from all 3 communities.
- RWJF, PHII, and Deloitte will provide additional subject matter expertise to the Sustainability working group.
- Working group members should meet twice a month.

Legal/Policy/Regulatory

Scope Statement:

 The Legal Working Group will identify policy and regulatory issues, develop model solutions, and initiate advocacy for the models.

Rules of the Road:

- Members will have experience with legal frameworks in their jurisdictions and will be drawn from all 3 communities.
- Working group members should meet twice a month.

Organizational Structure

