Regional Syndromic Surveillance Data Sharing Workshops: Process and Early Outcomes

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Objective

Promote inter jurisdictional syndromic surveillance (SyS) data sharing practices with a training model that engages participants in collaborative learning.

Introduction

Sharing public health (PH) data and practices among PH authorities enhances epidemiological capacities and expands situational awareness at multiple levels. Ease of data sharing through the BioSense application, now part of the National Syndromic Surveillance Program (NSSP), and the increased use of SyS nationwide have provided opportunities for region-level sharing of SyS data. In addition, there is a need to build workforce competence in SyS given powerful new information technology that can improve surveillance system capacities. Peer-to-peer learning builds the relationships and trust among individuals and organizations that are required for inter jurisdictional data sharing.

Methods

The SyS data sharing workshops are based on a training model in which participants first share a limited amount of SyS data, learn for one another, and then make plans to grow inter jurisdictional SyS data sharing (Figure 1). Workshop objectives and agenda were developed by Ishikawa Associates, ISDS, ASTHO, and CDC. HHS regions for workshops were selected based on SyS data availability, BioSense participation, and interest in SyS data sharing.

Each data sharing workshop was tailored to participant needs for the knowledge and skills necessary for SyS data sharing. Using a nonformal education approach¹, participants selected a syndrome(s) to share limited emergency department visit data before the workshop. The workshop agenda then includes sharing those data, exchanging best practices, documenting perceived benefits and barriers to SyS data sharing, and brainstorming solutions and setting next steps.

Results

Regional SyS data sharing workshops have been conducted in 8 of the 10 HHS Regions, reaching 98 surveillance professionals from 63 state and 35 local PH agencies. Across the workshops, influenzalike-illness (ILI) was the most frequently selected syndrome of interest, primarily because many jurisdictions already used SyS for ILI surveillance and the data was available for analysis and sharing. Additionally, the regular flu season experienced nationwide helped to choose a timeframe for analysis. Other selected syndromes reflected the diversity of SyS applications, including CO poisoning, drug overdose, asthma, heat-related illness, and gastrointestinal illness.

Perceived benefits to SyS data sharing included cross-border case-finding, identification of regional patterns and trends, enhanced national situational awareness, hypothesis generation and testing, and retrospective analyses to improve PH practice². Data quality, legal issues, lack of metadata, and the absence of specific functionalities in BioSense were listed as barriers.

Action items have included work on a green paper on barriers to data sharing, presentations at national conferences, regular information exchanges, syndrome definitions, and increased data sharing with CDC and other stakeholders through the BioSense application.

Conclusions

The outcomes of these workshops include demonstration of an effective training format for engaging PH surveillance professionals through relationship building, trial data sharing, and collaborative priority setting and action planning as a necessary first step to identifying and addressing barriers to data sharing. Ongoing training will be required as new jurisdictions use SyS and experienced ones seek to improve their practice.

SyS Data Sharing Workshop Process



Figure 1: Illustration of the syndromic surveillance data sharing workshop model.

Keywords

Data sharing; Syndromic surveillance; Non-formal eduction; Training

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References

- Nonformal Education Manual, U.S. Peace Corps, Pub. No. M0042, Reprinted 2011.
- ISDS. Check! Explore barriers and solutions to data sharing on BioSense 2.0. HHS Region 5 Data Sharing Workshop participants. www.syndromic.org.

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