

California Syndromic Surveillance (Sys) & other surveillance & response systems

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State Epidemiologist

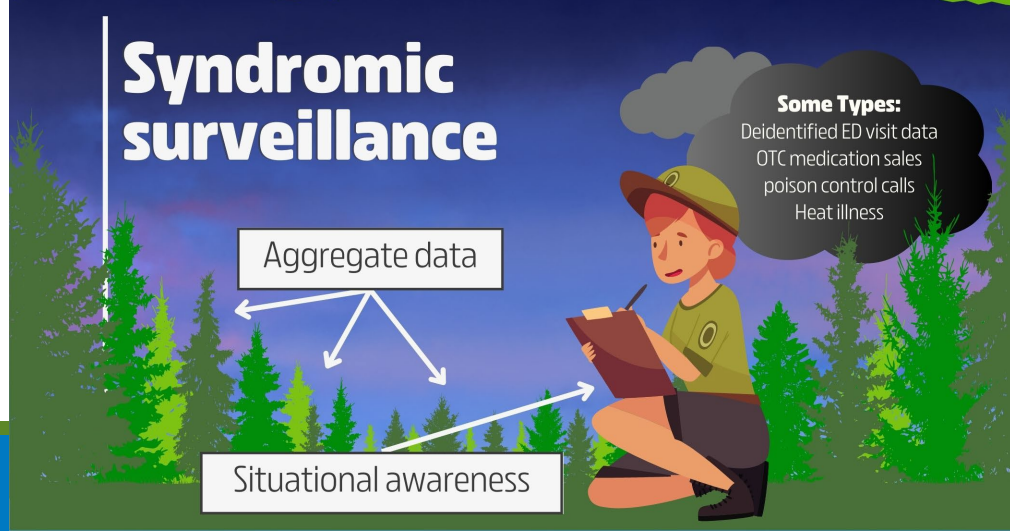
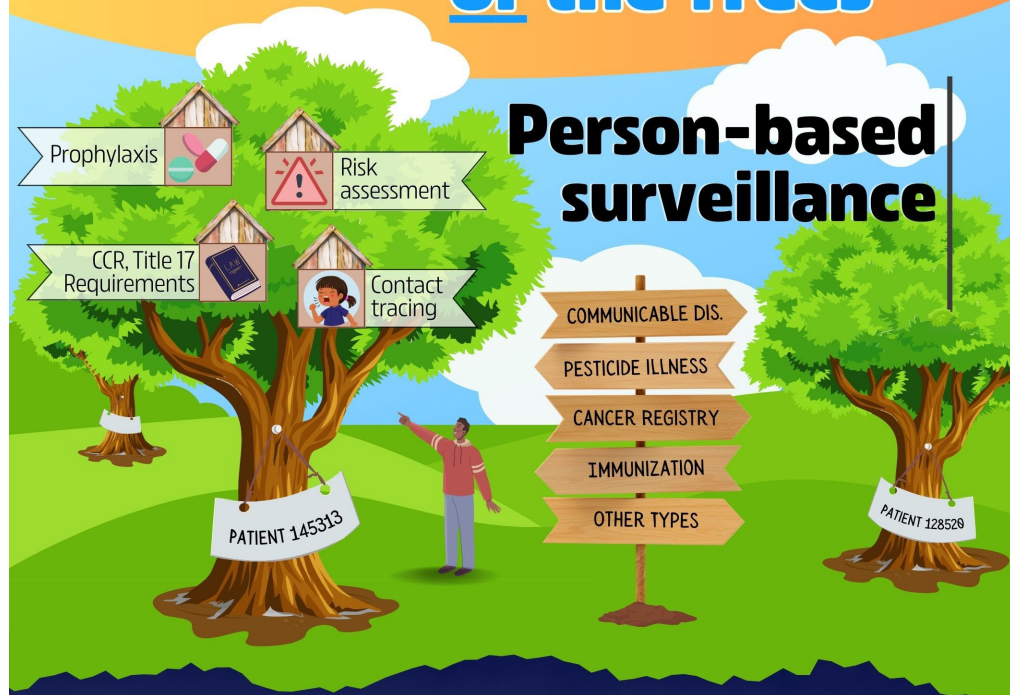
Deputy Director, Center for Infectious Diseases

March 7, 2024

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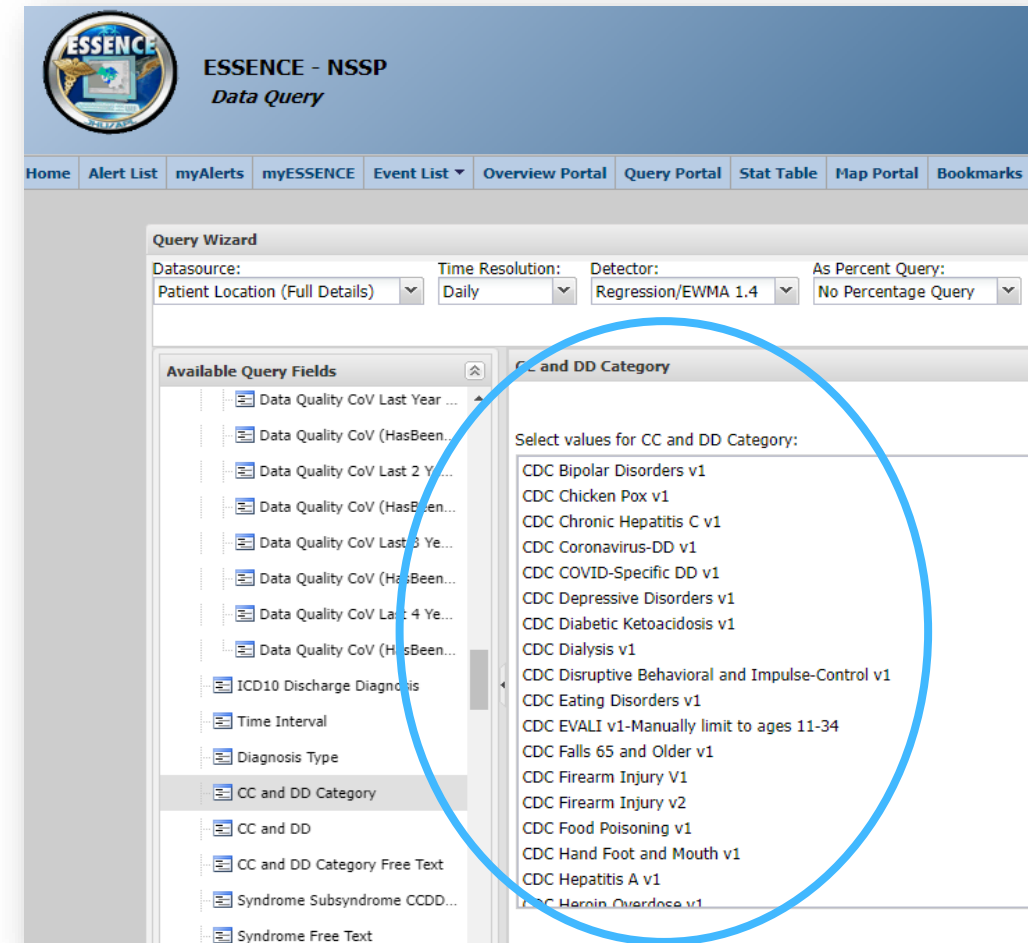


In Public Health, We Can't Miss the Forest or the Trees



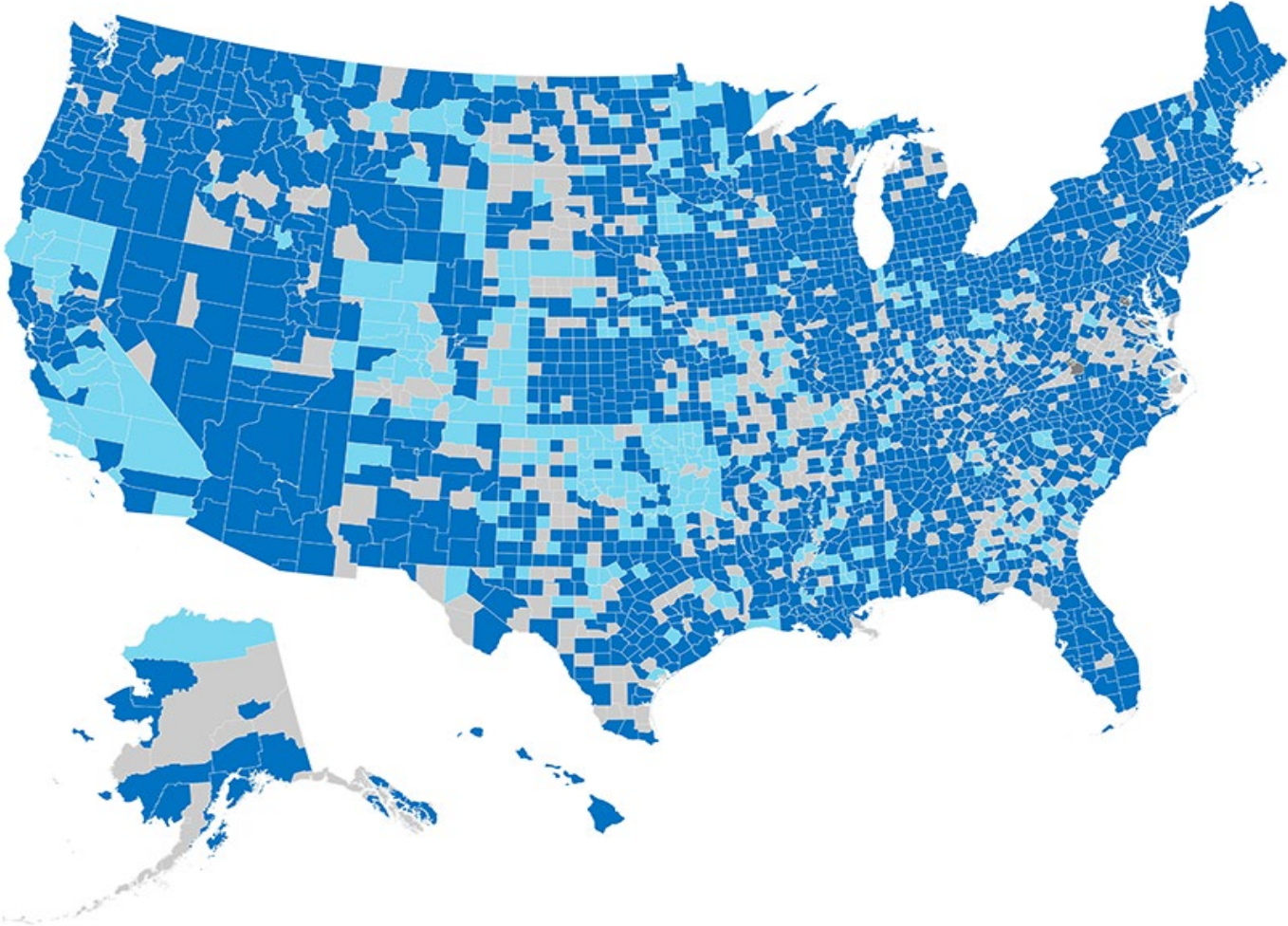
National Syndromic Surveillance Program (NSSP) BioSense Platform

- Secure, cloud-based computing environment, **free**
- Hosted by CDC's National **Syndromic Surveillance** Program (NSSP)
- **Electronic Surveillance System** for the **Early Notification of Community-based Epidemics** (ESSENCE)
- **ESSENCE** is used to visualize, analyze, monitor, and share syndromic data and analyses
- Posit (RStudio), SAS Studio, Dashboards
- Patient data are submitted within **24 hours** of the patient's initial encounter



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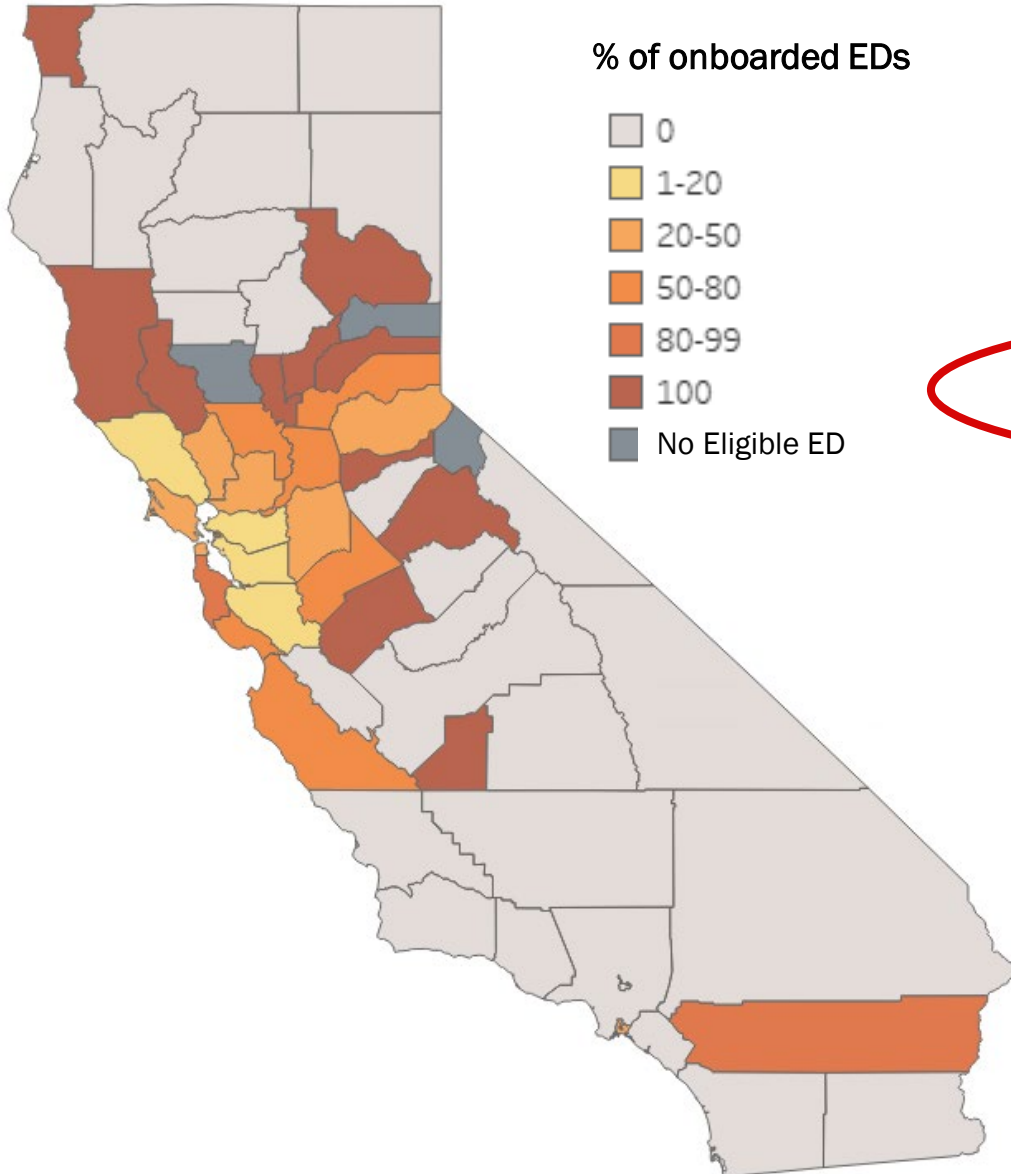
Non-Federal NSSP Emergency Facility Participation
August 1, 2023, to November 1, 2023



- Recent Data in NSSP
- No Recent Data in NSSP
- No Eligible Facilities

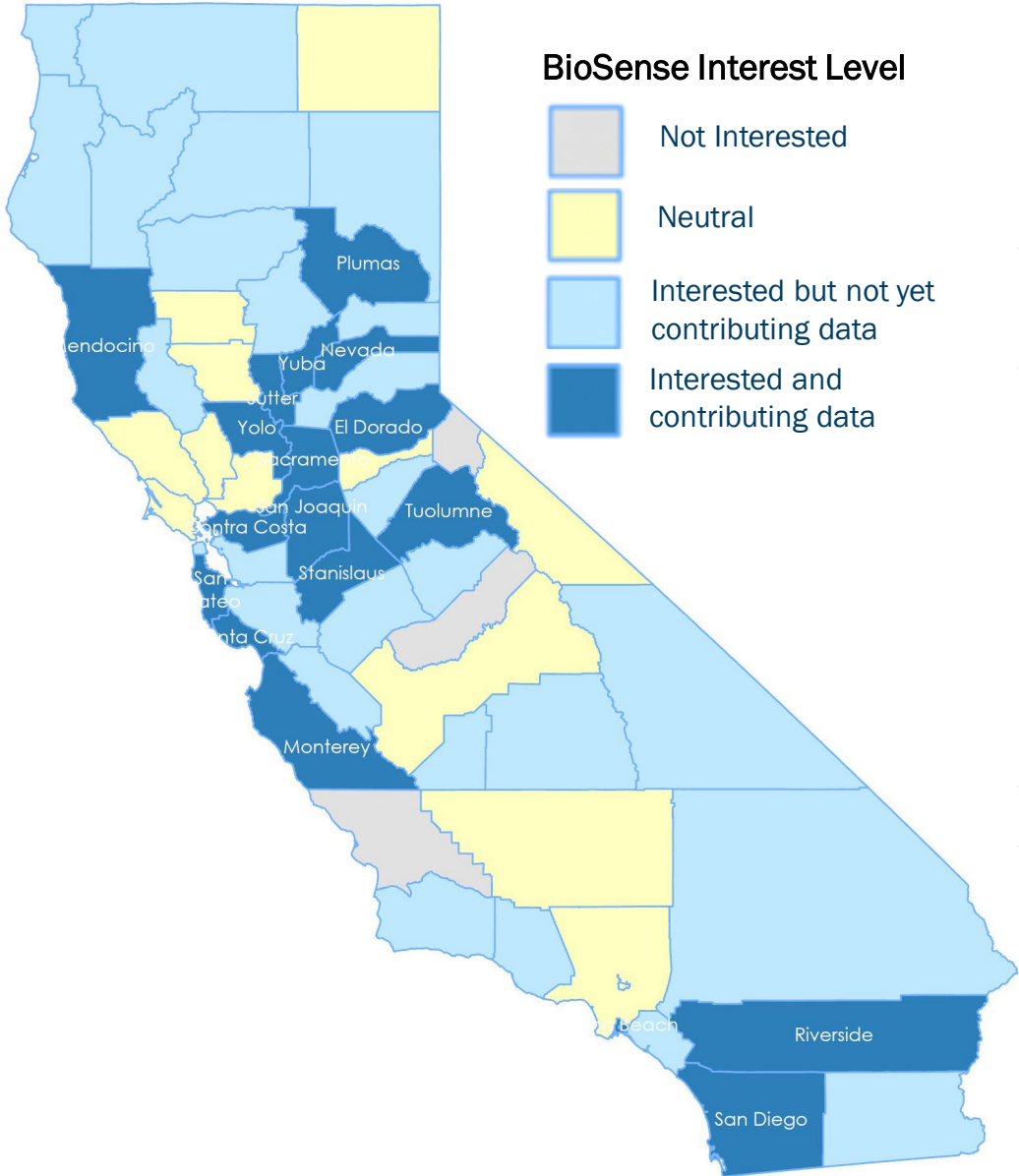


CA LHDs and EDs Participation in BioSense



- 30 of 58 (52%) LHDs with eligible EDs have at least one ED submitting data to BioSense.
- 82 of 340 (24%) eligible EDs in CA submit data to BioSense.
- 12 LHDs independently onboarded 56 EDs to BioSense.
- 2 Health Systems (Sutter Health & Adventist Health) independently onboarded 24 EDs in 17 LHDs to BioSense.

CA LHDs BioSense Interest & Data Contribution Status



LHDs Capabilities Survey, CDPH 2023

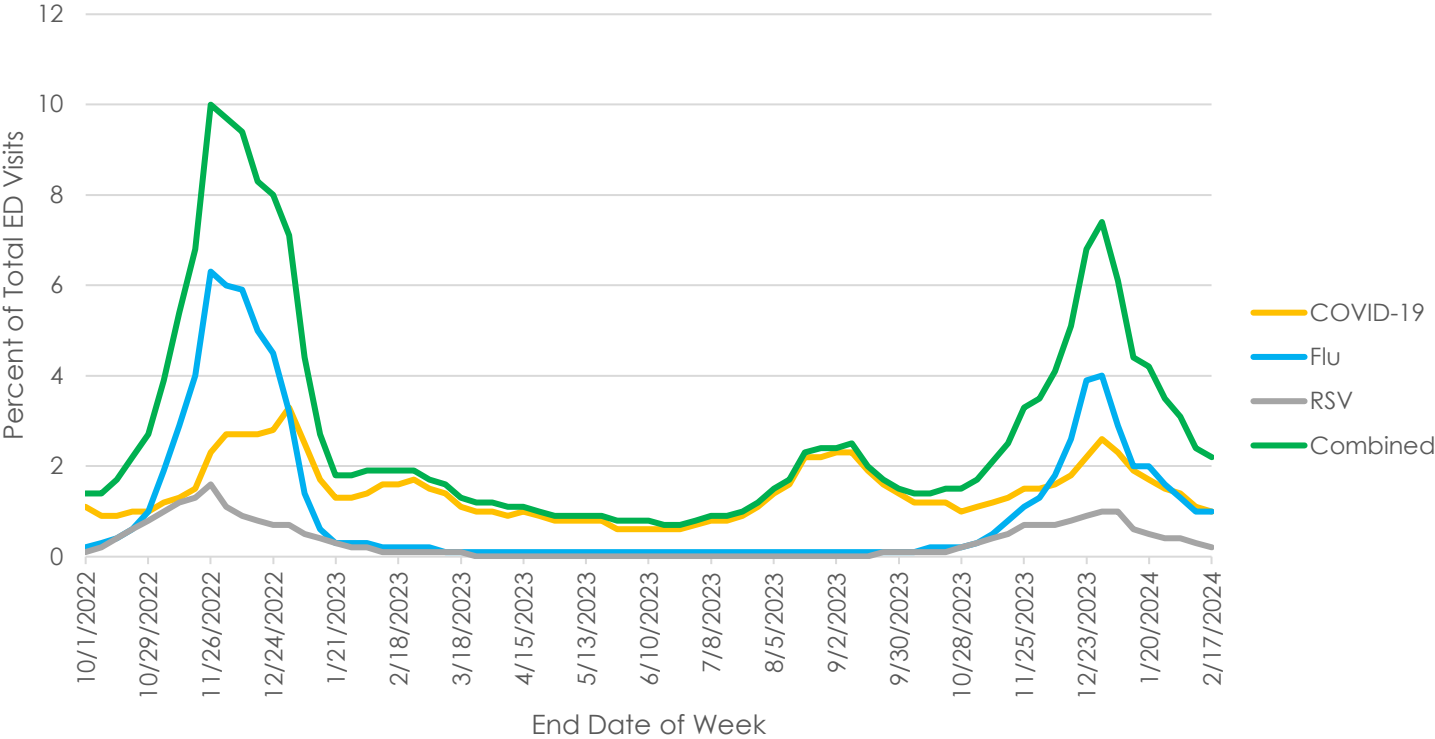
- CDPH surveyed all 61 LHDs and received a 100% response rate.
- 44 of 61 (**72%**) LHDs surveyed are **interested** in onboarding their EDs and contributing data to BioSense.
 - 18 of 61 (30%) LHDs surveyed are interested and currently contributing data to BioSense.
 - 26 of 61 (42%) are interested but are not yet contributing data to BioSense.
- 14 of 61 (23%) LHDs surveyed are neutral.
- 3 of 61 (5%) LHDs surveyed are not interested in BioSense, one of these LHD does not have eligible ED.

Benefits of Participating in BioSense/NSSP

- ✓ **Monitor Disease Trends**
- ✓ **Detailed Data Access and Standardized Analytic Tools** – Access by LHDs to ED data using pre-defined algorithms and queries built-in BioSense/ESSENCE
- ✓ **Access to Standardized Data** – BioSense data elements follow the National Public Health Information Network (PHIN) Messaging Guide – supports CMS Promoting Interoperability Program

COVID-19, flu, and RSV ED visits decreasing. (Data through 2/17/2024)

Weekly California Emergency Department (ED) Visits by Viral Respiratory Illness, as Percent of All ED Visits

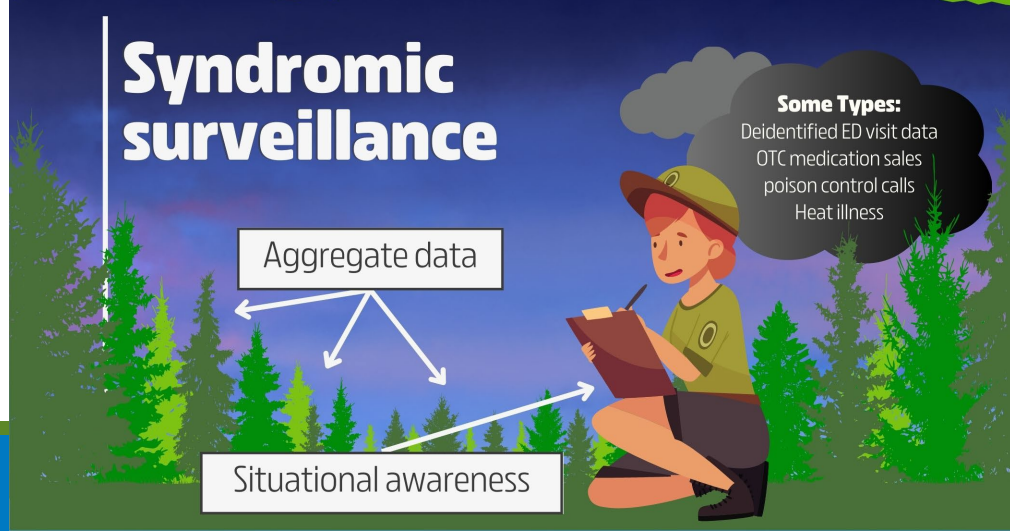
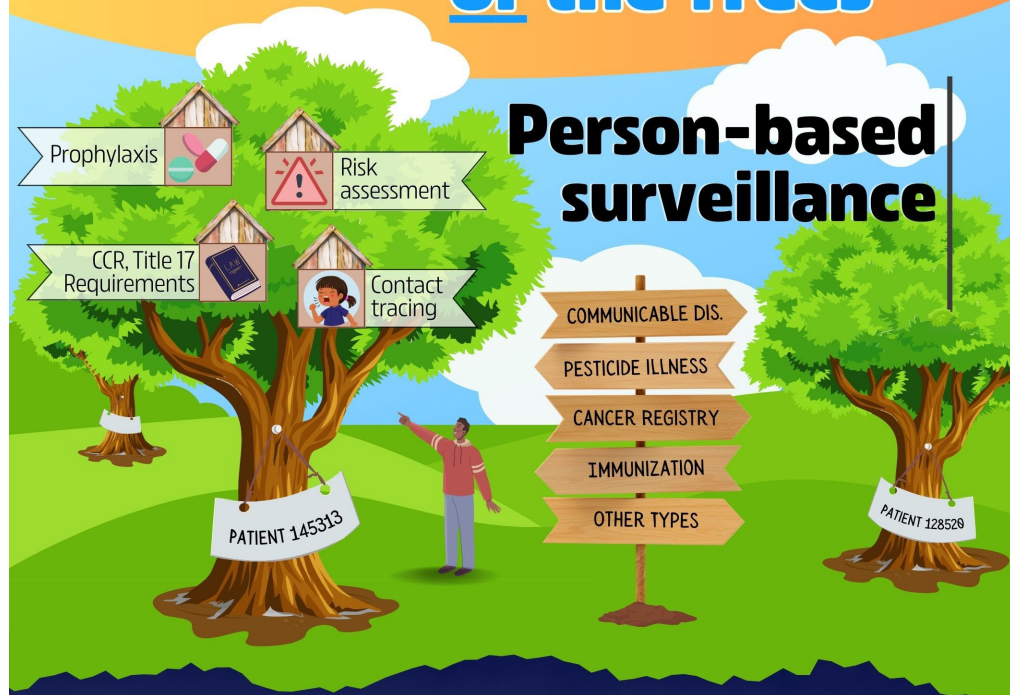


Data Source: CDC's State level pathogen-specific ED test positivity data; from the National Syndromic Surveillance Program (NSSP).

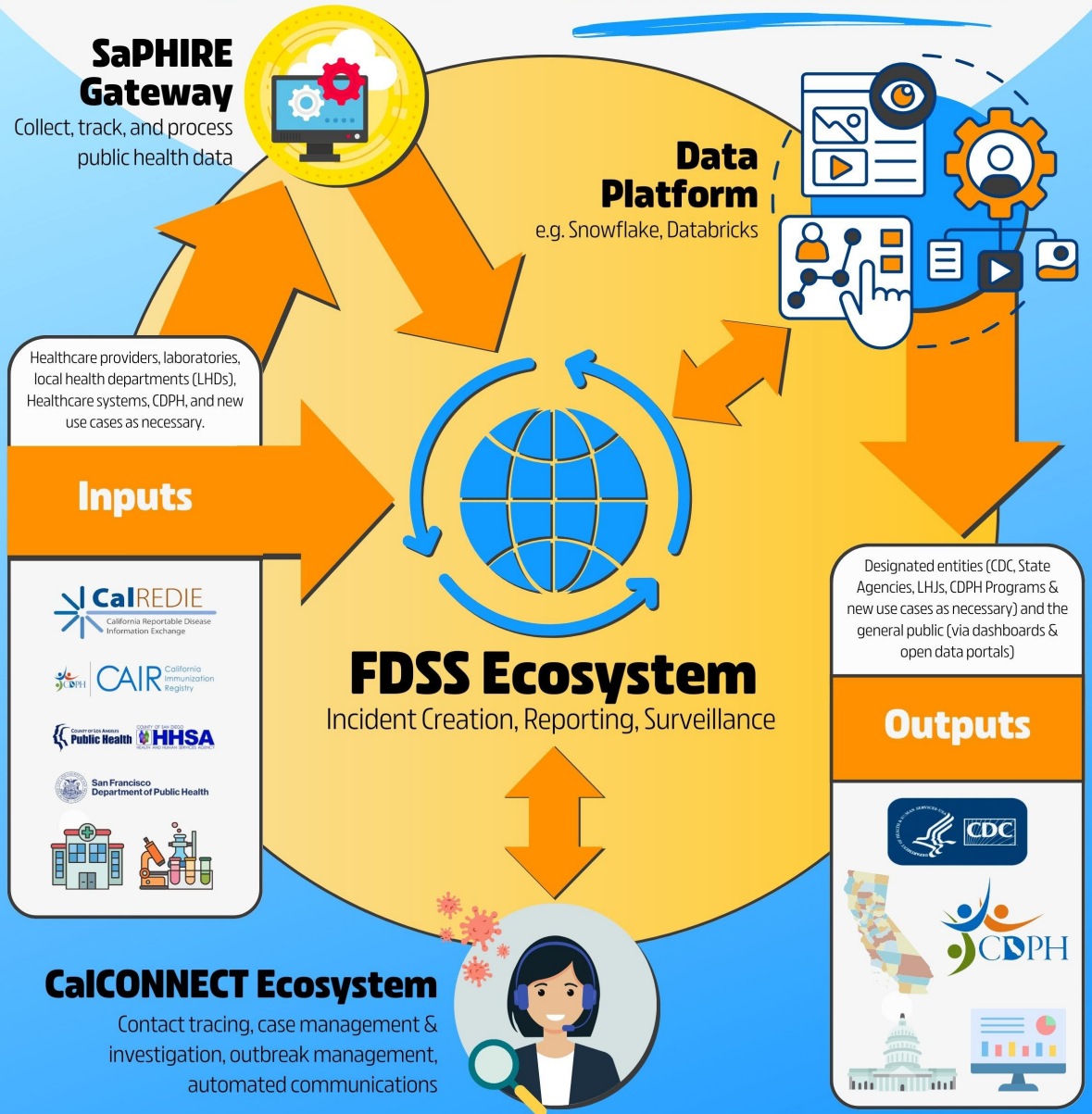
Benefits of CDPH Being Site Admin

- ✓ CDPH will streamline onboarding of new facilities and healthcare systems. *LHD's and hospitals have expressed interest in onboarding at the healthcare system level, and CDPH as the site admin, would support this effort.*
- ✓ CDPH will provide troubleshooting and help desk support to LHDs.
- ✓ CDPH will be better equipped to share statewide and regional trends.

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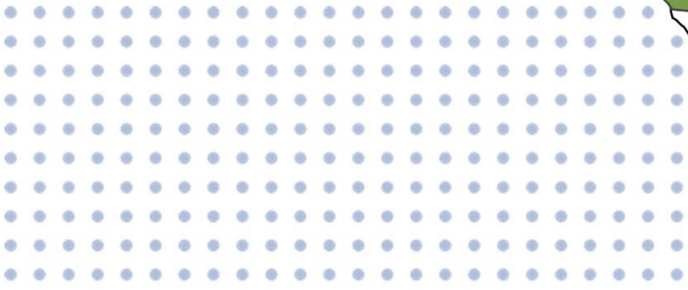
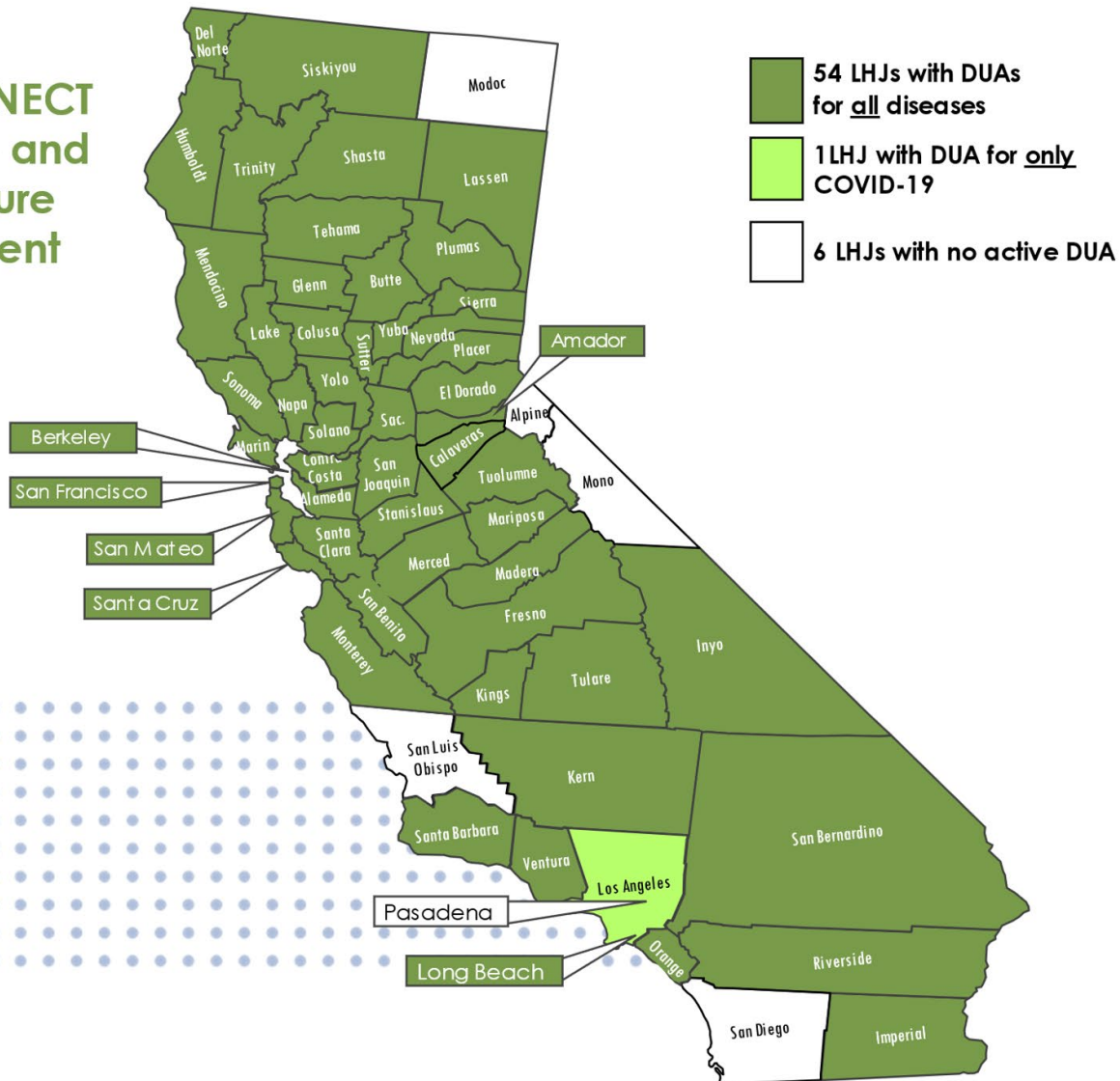


Legally-Mandated DISEASE SURVEILLANCE & CONTROL SYSTEM



CalConnect – Public Health Response System - LHJ use

CalCONNECT
Data Use and
Disclosure
Agreement



Eff: 3/5/2024



Questions?

SyndromicSurveillance@cdph.ca.gov

Supplemental – not shared during meeting

CMS Medicare Promoting Interoperability Program

- A minimum of **60 points** is required to satisfy the scoring requirement (out of 100)
- Eligible hospitals or critical access hospitals scoring below the required minimum points will not be considered meaningful EHR users and could be subject to a downward payment adjustment

Public Health & Clinical Data Exchange Objective

Measure	Details	Points Available	Reporting Type	Exclusion available?
Immunization Registry Reporting	Submit immunization data and receive immunization forecasts and histories from the public health immunization registry/immunization information system (IIS).	Up to 25 points available for all four measures	Yes/No attestation	Yes
Syndromic Surveillance Reporting	Submit syndromic surveillance data from an emergency department (POS 23).		Yes/No attestation	Yes
Electronic Case Reporting	Submit case reporting of reportable conditions.		Yes/No attestation	Yes
Electronic Reportable Laboratory (ELR) Result Reporting	Submit ELR results.		Yes/No attestation	Yes

<https://www.cms.gov/medicare/regulations-guidance/promoting-interoperability-programs>
 CDPH - Health Information Exchange Gateway (ca.gov)

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