Facilitating Epidemiology Best Practices and Collaboration across State Health Department Programs

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CSTE Epi Methods Webinar
December 4, 2014

Overview

- Issue
  - Desire to improve communication and collaboration among epidemiology and data staff at the Wisconsin Division of Public Health (DPH)
- Challenge
  - Epidemiologists are dispersed throughout DPH, separate from the Office of Health Informatics (OHI).
- Solution
  - Piloted and implemented a working group model

Background

Wisconsin Division of Public Health

- Bureau of Communicable Diseases
- Bureau of Community Health Promotion
- Bureau of Environmental and Occupational Health
- Office of Health Informatics
- Office of Policy and Practice Alignment
- Office of Preparedness and Emergency Health Care
- Bureau of Operations

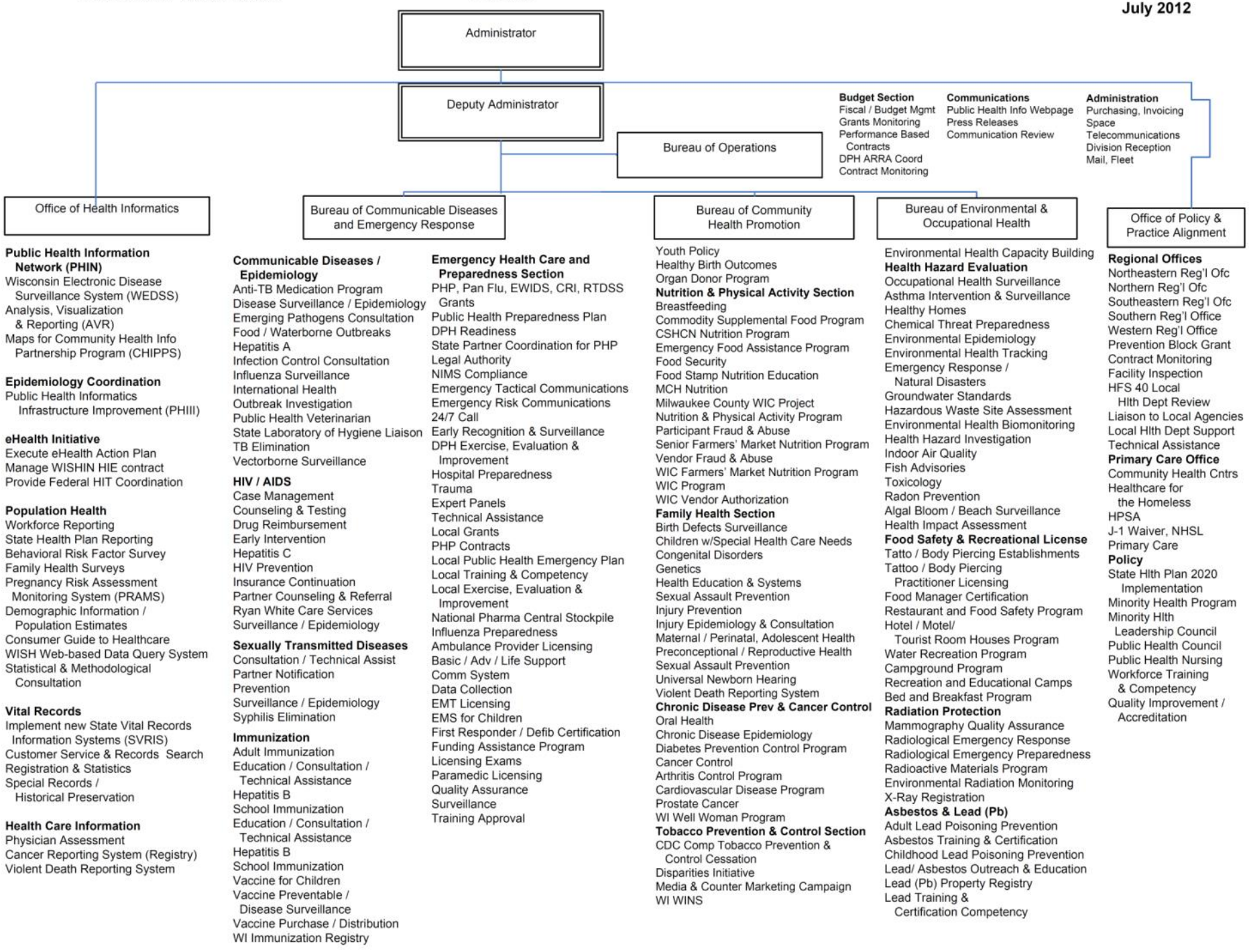
Epidemiology Staffing Model

- Epidemiologists are (primarily) embedded within programs such as Oral Health, AIDS/HIV, Communicable Disease, Asthma, Tobacco, and Maternal and Child Health.
- Office of Health Informatics (OHI) has research analysts and data stewards; the DPH Chief Epidemiologist (hired November 2013) also sits in OHI.

Division of Public Health

Functions

July 2012



Epidemiology Staffing Model

- Communicable Diseases
  - Outbreak investigation
  - HIV/AIDS and sexually transmitted diseases
  - Immunization
- Community Health Promotion
  - Chronic disease, oral health, tobacco, nutrition and physical activity
  - Maternal and child health
  - Injury

Epidemiology Staffing Model

- Environmental and Occupational Health
  - Asthma
  - Lead poisoning prevention
  - Environmental Public Health Tracking
- Preparedness and Emergency Health Care
  - Disaster and emergency planning
  - Preparing for epidemics, outbreaks, and pandemics
  - Trauma

Epidemiology Staffing Model

- Policy and Practice Alignment
  - Regional offices and local health department support
  - State Health Plan: Healthiest Wisconsin 2020
- Health Informatics
  - eHealth
  - Electronic disease surveillance
  - Health care information
  - Population health systems and surveys
  - Vital records

Epidemiology Staffing Model

- Organizational structure provides strong links between epidemiologists and program staff.
- However, it does not facilitate collaboration, consistency or interaction of epidemiologists across programs and with OHI staff.
- Many epidemiologists had expressed an interest in opportunities to connect and work together across bureaus, offices and program areas.

Methods

- CDC assignee convened small group of epis in early 2011 to assess interest in regular meetings.
- Decided to pilot division-wide working group.
  - Format: seminar sessions proposed.
  - Topics: data sources, share work, training.
  - Inclusion: invite all epidemiologists, fellows, research analysts and scientists, and data owners across DPH; include anyone else interested.
  - Meeting frequency: one hour, monthly.

Methods

- Desire to enhance work, not increase burden
- Email distribution list created from:
  - Contacts from prior epi events
  - Organizational charts
  - Job classifications
  - Requests to be added
- Ongoing direction from volunteer planning committee and periodic surveys of invite list

DPH Epi/Data Working Group

- First meeting held in August 2011.
- Webcast option provided for regional staff.
- Sessions recorded and archived with materials on shared drive.
- Attendance has ranged from 15-30 in person and another 1-5 viewing remotely.

Working Group Topics

- Clinical data sets available for analysis
- GIS examples and opportunities
- Public Health Information Network (PHIN) and University of Wisconsin Medical Record–Public Health Information Exchange (UW MED-PHINEX)
- Flu and communicable disease outbreaks
- Tips for presenting data to partners

Feedback from Participants

- Survey was sent to contact list after first 5 sessions (N=35).
- Reasons for attending:
  - Interest in the topic (71%)
  - Professional development (66%)
  - To support the working group (51%)
  - To get to know other epi and data staff (49%)

Feedback from Participants

- Survey respondents expressed support for continued meetings, monthly frequency, and meeting format of presentations and interactive discussion.
- Interest in topics such as SAS code and analyses, data system updates, record linkage and available data sets.

Working Group Topics

- Survey of the Health of Wisconsin (SHOW)
- Behavioral Risk Factor Survey method changes
- Sexual minority health
- Health and disability
- Medicaid 101
- Wisconsin Family Health Survey
- Internal approval process for data dissemination

Working Group Topics

- Healthiest Wisconsin 2020 and Minority Health Report
- Environmental health data
- Accessing Medicaid and Wisconsin Health Information Organization (WHIO) data
- Vital records system updates
- Age adjustment
- Wisconsin statewide homeless count

Successes

- Staff demonstrate continued interest based on strong attendance and requests to be added to the group.
- Organizational leadership has utilized group as a forum to communicate with and gather feedback from epi and data staff.
- Distribution list consists of nearly 100 staff, fellows and students from across the Division.

Successes

SAS Analysis for Behavioral Risk Factor Survey

- Offered two half-day, hands-on sessions in a training lab.
- Arranged for participants to have remote access to their desktop computers (for SAS access).
- Both sessions reached capacity.
- Based on high interest, additional SAS trainings and resources in development.

Successes

SAS User Group

- Formed after interest in BRFSS training session.
- Developed a SharePoint site with discussion board and resource sharing.
- Designed a series of three trainings on SAS Basics.

Successes

Epi/Data Open House (February 2014)

- Invited staff to showcase their work through posters, report handouts and table displays
- Advertised event throughout Department of Health Services office building
- More than 20 presenters, representing all participating bureaus and offices


Introduction
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Results (cont.)
Discussion
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Contact Information
Population Health Institute

Successes

- Epi/Data Working Group model has served to:
  - Increase knowledge-sharing among program areas.
  - Educate epis on important analytic topics.
  - Better coordinate epi work across programmatic areas.
- Group has now become institutionalized, has gained leadership support and is pursuing sustainability.

Next Steps for Working Group

- Continue monthly seminar meetings.
- Make Epi/Data Open House an annual event.
- Maintain current group as a learning community and create an additional DPH Core Epidemiological Workgroup to:
  - Serve as a decision-making body.
  - Develop needed division-wide epi policies.
  - Guide implementation of best practices.

Working Group Meetings Changes

- Increase time spent on participant introductions at beginning of each meeting.
  - Highlight key work activities and topics
  - Provide regular staff updates
- Increase focus on sharing of detailed methods.
- Develop a repository of analytic code and sample data.

Core Epidemiological Workgroup

- Modeled after the Strategic Prevention Framework State Incentive Grant (SPF SIG) State Epidemiological Outcome Workgroups.
- Draft charter has been developed and will be shared with leadership.
- Membership:
  - Epidemiology liaisons from each Bureau or Office
  - Chief Medical Officers

Acknowledgements

- Epi/Data Working Group Planning Team
- DPH management, for their support of the Epi/Data Working Group
- Ousmane Diallo, current group facilitator
- The dedicated epidemiologists, research analysts, data owners and data supporters at DPH

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