

Linking informatics and cross-programmatic public health strategic objectives

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Objective

To develop strategic objectives necessary to optimize the collection, integration and use of information across public health programs and internal and external partners for improving the overall health and safety of people and their communities.

Introduction

There is national recognition of the need for cross-programmatic data as well as system coordination and integration for surveillance, prevention, response and control implementation. To accomplish this, public health must develop an informatics competency and create an achievable roadmap, supported by performance measures, for the future. Within the New York State Department of Health, Office of Public Health (OPH), a cross-organizational and cross-functional Public Health Information Management Workgroup (PHIM-WG) was formed to align public health information and technology goals, objectives, strategies and resources across OPH. In June 2011, the OPH Performance Management Initiative, funded by the Centers for Disease Control and Prevention's National Public Health Improvement Initiative, offered strategic planning workshops, funded by the Association for State and Territorial Health Officials (ASTHO), to PHIM-WG.

Methods

Senior management of the major programmatic areas within OPH including, Communicable and Chronic Disease, Family Health, HIV/AIDS, Environmental Health and Wadsworth Center Laboratory, identified representatives to participate in PHIM-WG. Informatics, information technology (IT) and information management (IM) literature was reviewed to determine a framework upon which to build the strategy (1). Words and concepts with multiple interpretations were identified and agreed-upon definitions were used for planning discussion. An assessment of the as-is and desired state formed the basis of the strategic objectives and destinations. A community-balanced scorecard (CBSC) approach (2), grounded in the Public Health Accreditation Board Essential Services (PHAB-ES), is being used to guide the development of a strategic plan, to include performance metrics.

Results

PHIM-WG includes physician, epidemiology, program management, policy and planning, IT, quality improvement and project management representatives. IM, composed of the integration of program, processes, policy and technology, was the selected framework. An initial informatics lexicon was

developed. Using CBSC, identified strategic destinations were aligned with PHAB-ES objectives, which were then adapted and aligned with the IM framework. An IM vision and strategy map, including strategic objectives and destinations, were produced. Public health IM desired state, objectives, and activities were linked to the PHAB-ES within four major community perspectives; health status, implementation, process and learning, and assets. PHIM-WG is working to produce a more-fully developed strategy and implementation plan, including engaging internal and external partners, defining associated performance metrics to measure progress to the desired state and aligning with NYSDOH strategic planning efforts.

Conclusions

As a cornerstone of public health, IT/IM should be and can be aligned with or directly linked to the public health essential services. The development and promotion of a common informatics lexicon and workforce engagement and training are critical to public health, especially for advancing data analysis, use, and dissemination capabilities. PHAB-ES-based IM strategic planning can be an essential first step for community collaborators to define the vision, objectives and measurable activities to advance the technology, research and practice of public health surveillance.

Keywords

Informatics; information management; strategic planning; public health; cross program

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