

Marketing a syndromic surveillance system to hospital emergency departments

Melissa Powell* and Kyle Ryff

Oregon Health Authority, Portland, OR, USA

Objective

Encourage hospitals to participate in the Oregon Health Authority (OHA) emergency department (ED) syndromic surveillance system, Oregon ESSENCE.

Introduction

OHA, in collaboration with the Johns Hopkins University Applied Physics Laboratory, implemented a syndromic surveillance system, Oregon ESSENCE. A critical component to developing and growing this statewide system is obtaining buy-in and voluntary participation from hospital EDs. This process involves approval at multiple levels within a hospital facility from administration to information technology (IT) staff responsible for sending electronic ED data to the Oregon ESSENCE system. Therefore, developing marketing materials that appeal to a wide range of recruitment audiences is a key step in obtaining stakeholder buy-in. OHA adopted the ISDS and CDC syndromic surveillance standards for the public health objective of the Center for Medicaid and Medicare Services (CMS) Meaningful Use Programs. However, Oregon hospitals will not receive financial incentive to participate in Oregon ESSENCE from CMS until 2014 during stage two of Meaningful Use. Consequently, this project's early years will focus on obtaining voluntary participation from hospitals.

Methods

OHA developed a recruitment packet to provide information to hospital Chief Executive Officers, Chief Information Officers, Infection Preventionists, Meaningful Use coordinators and IT staff. The packets will be distributed in a number of ways: primarily, during face-to-face meetings with hospital and public health stakeholders, and also during other forums such as meetings of the Oregon Association of Hospitals and Health Systems as well as broader Meaningful Use seminars. Recruitment folders include a brief overview of syndromic surveillance

and the ESSENCE system (Welcome to Oregon ESSENCE); a description of utility (Oregon ESSENCE: Real-time Data for Public Health Action); a list of the requested variables (Oregon ESSENCE Data Fact Sheet); examples of effective uses of ESSENCE (ESSENCE success stories); a visual diagram of the data flow process (Oregon ESSENCE data flow); and a list of action steps to begin participation (Let's Roll).

Results

We developed an informative packet of materials for a variety of audiences that is both appealing and concise. Oregon's hospitals come in all shapes and sizes, each with unique approval processes for engaging in data sharing, prioritization of voluntary public health projects, coordination of Meaningful Use efforts and IT support. Therefore, we expect that the breadth and depth of the marketing materials will be a critical component to successful recruitment of hospitals.

Conclusions

We developed appealing and concise information packets for a variety of audiences. While each individual may not need the full breadth of the information we are providing, depending on their role at the hospital, we anticipate that the recruitment packet provides a useful overview of Oregon ESSENCE and syndromic surveillance to a variety of hospital and public health stakeholders.

Keywords

Emergency departments; data exchange; marketing

*Melissa Powell

E-mail: melissa.e.powell@state.or.us