



International Society for Disease Surveillance Syndromic Surveillance for Meaningful Use: Inpatient and Ambulatory Clinical Care Data

Call for Nominations to Meaningful Use Workgroup

ISDS is seeking nominations for members of a new Meaningful Use Workgroup (MUse Workgroup) that will develop public health syndromic surveillance (PHSS) recommendations to support public health authorities in using Meaningful Use certified hospital inpatient and ambulatory EHR data for timely and effective public health prevention and response.

Background:

This project will expand ISDS's previous Meaningful Use recommendation through a community consensus-driven process. The recommendations will include business process documentation, sending and receiving requirements, and core or minimum data elements that support the documented business processes. The project initiates with a public call for potential uses of hospital inpatient and ambulatory clinical care data using a syndromic surveillance approach. Responses will be used to iteratively develop PHSS recommendations for the Meaningful Use programs. There will be two (2) 30-day stakeholder commenting periods on preliminary and then provisional recommendations.

In addition, this project will inform an assessment of what types of information interchange architectures can and should support the use of clinical EHR data for syndromic surveillance.

ISDS Meaningful Use Workgroup:

The multi-stakeholder MUse Workgroup will guide the development of ISDS recommendations. Workgroup members will work with ISDS staff to develop the project artifacts, provide advice about the subject, ensure input is obtained from relevant stakeholders, review draft materials, review stakeholder input, and recommend specific guidelines to the stakeholder community within the context of Meaningful Use.

ISDS is seeking nominations for members of this 10-person Workgroup (Page 3) with various stakeholder perspectives and expertise in public health practice and medical informatics. One workgroup member will be invited to chair the group by ISDS based on their experience and suitability to the role. Based on the public health uses that ISDS anticipates receiving during the [Call for Potential Uses of Public Health Syndromic Surveillance Data](#), specific expertise in routine public health surveillance using hospital inpatient and primary care data, chronic disease control and prevention, infectious disease control, and injury control and prevention may be requested. Also, given the policy implications of this project, professionals involved in national public health, healthcare, and medical informatics associations are requested.

NOMINATIONS ARE DUE BY 9:00 PM ET FRIDAY, NOVEMBER 11, 2011

Time Commitment: The ISDS MUse Workgroup will meet several times via teleconference and three times during in-person meetings in Boston, MA, and Atlanta, GA:

1. **Conference call** - Introduce the Syndromic Surveillance for Meaningful Use: Inpatient and Ambulatory Clinical Care Data project: November 30, 2011, 2:00-4:00 pm ET
2. **In-person meeting #1** - Review stakeholder input, identify preliminary recommendations: December 5-6, 2011
3. **Conference call** - Refine preliminary recommendations: December 21, 2011 (tentative)
4. **Conference call** - Review draft preliminary recommendation report: January 25, 2012 (tentative)
5. **In-person meeting #2** - Document business processes: February 14-15, 2012 (tentative)
6. **Conference call** - Review preliminary stakeholder comments: March 7, 2012 (tentative)
7. **In-person meeting #3** - Refine recommendations for provisional report: April 10-11, 2012 (tentative)
8. **Conference call** - Review draft provisional recommendation report: May 16, 2012 (tentative)
9. **Conference call** - Review provisional stakeholder comments: July 18, 2012 (tentative)
10. **Conference call** - Review draft final recommendation report: August 8, 2012 (tentative)

Workgroup members may be asked to attend additional conference calls, review materials, and provide feedback throughout the process. Follow-up e-mail communications or conference calls will be required.

Workgroup members will serve on a voluntary basis. All meeting travel and related expenses will be covered by ISDS. *ISDS will also cover workgroup member attendance to the ISDS Annual Conference in Atlanta, GA on December 6-7, 2011, including conference registration, travel, and lodging.*

Consideration and substitution: Priority for Workgroup membership will be given to nominations from ISDS Members. Please note that nominations and Workgroup membership are of individuals, not organizations, so "substitutions" of other individuals from an organization at meetings and conference calls are not permitted.

Material to submit: Self-nominations are welcome. Third-party nominations must indicate that the individual has been contacted and is willing to serve. To be considered for appointment to the Workgroup, please send the following information to meaningfuluse@syndromic.org, subject "Workgroup Nomination":

- [Completed Nomination Form](#)
- 1-page letter of interest highlighting experience relevant to the expertise described above and involvement in national public health, healthcare, or medical informatics associations
- Curriculum vitae or resume listing relevant experience

Deadline for submission: All nominations *must* be submitted electronically via the online submission form by 9:00 pm ET on Friday, November 11, 2011.

Questions: If you have any questions, please contact Charlie Ishikawa at 617-779-0886 or meaningfuluse@syndromic.org

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Syndromic Surveillance Meaningful Use Workgroup Position Descriptions

Seat Title	Description
Chair Person	Responsible for working with staff to ensure successful completion of the workgroup's mission, and making public presentations of the recommendations. A workgroup member will be invited to this position by ISDS based on their experience and suitability to the role.
ISDS Board Liaison	Responsible for ensuring that workgroup's activities are aligned with ISDS's mission, and represent the ISDS in this initiative among stakeholder leaders.
Local Public Health	Expert in local public health surveillance capabilities, health program needs for surveillance information, and deliberating from the perspective of local PHA
State Public Health	Expert in state public health surveillance capabilities, health program needs for surveillance information, and deliberating from the perspective of state PHA
Federal Public Health	Expert in federal public health surveillance capabilities, health program needs for surveillance information, and deliberating from the perspective of federal PHA
Ambulatory Healthcare (Private Practice)	Expert in patient health data collection at the point-of-care, utilization, and management practices in <u>private</u> practice settings
Ambulatory Healthcare (Network Practice)	Expert in patient health data collection at the point-of-care, utilization, and management practices in healthcare <u>network</u> practice settings
EHR Technology Department	Expert in EHR technology development practices, business requirements, and current and emerging trends
EHR Technology Implementation	Expert in implementing patient health data collection, utilization, and management practices within ambulatory health care practices
Clinical Care Surveillance	Expert in routine population health surveillance using patient health data from ambulatory care settings
Health Information Interchange Expert	Expert in health information transportation and messaging

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