The Office of the National Coordinator for Health Information Technology

AcademyHealth

COMMUNITY SPOTLIGHT

CHP SUBJECT MATTER EXPERT COMMUNITY
SAN DIEGO HEALTH CONNECT

SAN DIEGO, CA

"Both organizations have successfully collaborated with healthcare systems, provider organizations, and community health centers across the county of San Diego to capture, aggregate, and present meaningful data to support community health efforts with the common goal of improving healthcare delivery and health outcomes in the region.

COMMUNITY OVERVIEW

The San Diego Health Connect (SDHC) is a public, health information exchange (HIE) that successfully designed and implemented a regional health information organization in the San Diego and Imperial Counties. As a part of the Community Health Peer Learning (CHP) Program, they will partner with Be There San Diego (BTSD), a multi-stakeholder collaborative experienced in improving population health with a focus on cardiovascular disease. With extensive expertise in technical infrastructure and data exchange, SDHC is an active trading partner with The Sequoia Project, a national HIE, and has partnered with San Diego County Health and Human Services to facilitate automated, electronic transmittal of relevant patient data for monitoring public health and delivering services where needed. In addition, their patient indexing system allows them to positively identify over 95 percent of the region's adult population, and their standards in naming and information records have increased patient matching to over 98 percent. BTSD, in turn, excels in sharing and comparing data in a collaborative learning environment to identify and promote best practices and improve health outcomes.

KEY INSIGHTS & LESSONS

Through the collaboration between BTSD and SDHC, the two organizations have experienced and overcome barriers and challenges, and developed and implemented solutions that can be shared with other communities:

- **Solve patient matching early and often.** Inconsistent naming and data entry practices amongst providers and inaccurate or incomplete records complicate the automation of electronic patient matching. Without the cooperation and collaboration of disparate health systems, the patient matching challenge could undermine the entire HIE initiative. Through the Master Patient Index workgroup and the dedication of participants to the overarching goal of sharing patient information for better health care outcomes, workgroups members have collaborated on solutions to substantially reduce the number of potential unmatched links.
- **Partner with public health.** The cooperation of the County of San Diego Health and Human Services has been crucial to HIE adoption for public health reporting amongst health care providers. The shift from a paper to electronic reporting could not have been done if the County had not mandated that the healthcare community use the HIE to report public health data. With this involvement, resolution of technical challenges and implementation of new work flow within the public agencies and participants' laboratories has gone much smoother and quicker than originally anticipated.

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PROJECT SNAPSHOT

Site Type	Health Information Exchange
Areas of Expertise	Technical Infrastructure / Data Exchange • Designed and implemented a regional Health Information Organization • Collects data from hospitals, health centers, public health services, nursing facilities, and hospices, as well as, automated electronic lab reporting and syndromic surveillance to increase data accuracy and completeness, and provide more effective context for follow-up and response • Partnership with Health and Human Services to facilitate automated, electronic transmittal of relevant patient data for monitoring public health and delivering services where needed • Partnership with Be There San Diego (regional cardiovascular health initiative) to facilitate automated, electronic transmittal of relevant patient data to support chronic disease and population health management.

- **Partner with clinical improvement projects.** When partnering with another organization focused on improving population health it is important to reach agreement and maintain focus on shared, common goals; start small on a defined condition or population; identify opportunities to provide value for all partners; prioritize collaboration while recognizing competition among partners; and include robust data validation to build and maintain trust in the data.
- **Partnering with the community.** While adherence to national standards are important to achieving interoperability, developing community-wide consensus on technical, functional and semantic interoperability are fundamental to regional community healthcare information exchange. This community-wide consensus drives value and sustainability while waiting for all to conform to the national standards.

KEY ACHIEVEMENTS

- **Health Information Exchange:** SDHC supports query/response, direct, and consumer mediated health information exchange with over 7.5 million transactions each month both locally and nationally. It is an active trading partner with a national HIE exchange, The Sequoia Project, and facilitates information exchange between local providers and the Department of Defense, VA, Kaiser, SSA, Stanford University and other major institutions and agencies.
- **Heart Attack and Stroke Free Zone (HASFZ) Project:** The HASFZ project has engaged eight health care organizations to reduce heart attacks and strokes by 50 percent in a target population of 4,000 patients. BTSD is collecting a robust set of data on these patients that includes demographics, socioeconomic indicators, medication data, diagnosis data, medical encounter data, health coach encounter data, and claims data.
- **HIE Patient Index**: SDHC has positively identified 95 percent of the region's population served by the San Diego and Imperial healthcare professionals in its master patient index/record locator service.
- **Patient Matching**: Through participant based workgroups to address standards in naming and recording of demographic information, SDHC has improved automatic patient matching capability with a 75 percent reduction in manual potential link tasks and 110 percent improvement in automated links, increasing the rate of patient matching from 70 percent to over 95 percent.
- **Public Health**: SDHC has automated Electronic Lab Reporting and Syndromic Surveillance between County of San Diego Public Health and hospitals in San Diego to transform the paper based system to one that is automated in real time. This has greatly improved the capacity to identify and prevent the spread of disease.

LEAD AGENCY

- **San Diego Health Connect (SDHC)** (http://sdhealthconnect.org/) is a regional Health Information Organization, committed to facilitate community-wide health information exchange to improve the quality and cost of the health care system. SDHC has successfully developed the partnerships, technical infrastructure, governance structure, strategic plan, and agreements to support the capture, exchange, and presentation of health care data across a growing number of organizations, systems, and providers.

PARTNERS/COLLABORATORS

- **Be There San Diego (BTSD) (**http://betheresandiego.org**):** A multi-stakeholder collaborative to eliminate heart attacks and strokes in San Diego County, BTSD has successfully developed shared goals and trusted relationships with clinical leadership across multiple competing health care organizations, systems, and providers to improve population health. Its partners actively share and compare data to identify and promote best practices in a collaborative learning environment.

MEET THE PROJECT TEAM!

Daniel Chavez, M.B.A.
Executive Director, San Diego Health Connect
CHP Role: Subject Matter Expert
Contact: dchavez@sdhealthconnect.org

Ask him about:
- Governance
- EMS-HIE integrations
- Patient matching
- POLST

Mark Branning
Interim Operations Manager, San Diego Health Connect
CHP Role: Consultant
Contact: mbranning@sdhealthconnect.org

Ask him about:
- Project management
- Interoperability
- HIE
- PHR
- EHR

Alicia Allison
Project Manager, San Diego Health Connect
CHP Role: Project Manager
Contact: aallison@sdhealthconnect.org

Ask her about:
- Public health reporting
- Participant on-boarding
- Data validation

Katherine Bailey, M.S.W.
Executive Director, Be There San Diego
CHP Role: Subject Matter Expert
Contact: k3bailey@ucsd.edu

Ask her about:
- Population health
- Sharing quality data
- Health system clinical collaboration
- Cardiovascular disease prevention

Christy Rosenberg, M.P.H.
Director of Programs, Be There San Diego
CHP Role: Subject Matter Expert
Contact: clrosenberg@ucsd.edu

Ask her about:
- Population health
- Health system transformation
- Quality improvement strategies
- Community-clinical linkages