

Mobile, Alabama Health Department moves from downloads and free software to near real-time access to data and apps

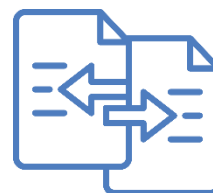


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CATEGORY: **Interoperable Data Systems**

Mobile County Health Department (MCHD) was able link to the state surveillance system and gained access to essential data in near-real-time without the need for manual intervention. MCHD then built the capacity to analyze the incoming data and produce public-facing COVID-19 dashboards. They supplied custom data reports for decision making and resource allocation to law enforcement, mayors, lawmakers, the court system, detention centers, hospitals, long term care facilities, residential facilities, school districts, universities, faith-based leaders and community organizations.

When the Mobile County Health Department (MCHD) in Alabama needed information on reportable conditions, they used to rely on manual data downloads and free software. Thanks to an innovative approach, they now have near-real-time access to back-end surveillance data and state-of-the-art visualization applications for all reportable conditions. Instead of slow, manual processes, they have built an infrastructure that provides the data they need to act quickly at a local level.



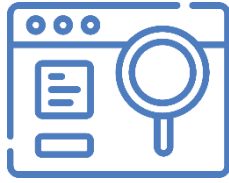
The “What”

MCHD had already begun to address this issue by collaborating with counterparts at the State of Alabama Department of Public Health (ADPH) and had successfully established a process to transfer Syndromic Surveillance data to the local MCHD epidemiologists. This work enabled the state and local health departments to work together quickly at the start of the COVID-19 pandemic to set up a similar automated data sharing and analytics route. When the pandemic started, local MCHD epidemiologists had to manually download case data from ADPH and analyze them with less powerful software, and it took substantial manual effort to provide information to guide decision making and response efforts. However, they were able to quickly stand up fast and efficient advanced data exchange processes through which they linked to the state surveillance system and gained access to essential data in near-real-time without manual downloads.



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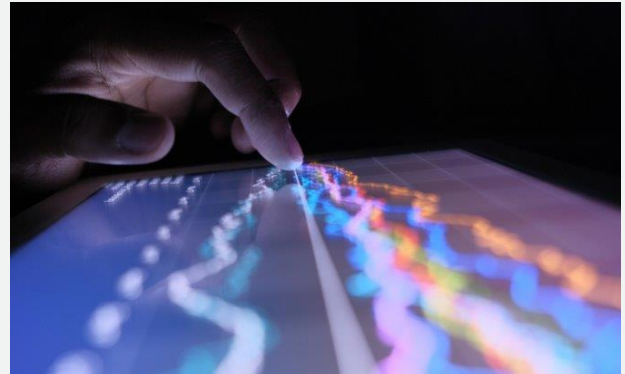


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The “So What”

Few national or state COVID-19 reports made data available to the public below the county level. The interactive COVID-19 data dashboard had 50,971 views and their vaccine information hub site had 99,221 views. MCHD’s reports allowed the department, municipalities and the public to know what was happening where they live. MCHD overlaid cases, vaccinations and the social vulnerability index to focus resources where they were needed most. They supplied custom data reports for decision making and resource allocation to law enforcement, mayors, lawmakers, the court system, detention centers, hospitals, long term care facilities, residential facilities, school districts, universities, faith-based leaders and community organizations.

MCHD then successfully built capacity to analyze the incoming data and produce meaningful information including public COVID-19 data dashboards. They established partnerships with local businesses and the University of South Alabama to support advanced data linkage storage and analysis and transitioned off the free software. They have further been able to hire skilled staff and acquire specialized software necessary to support this ongoing essential process.



The “Now What”

MCHD and ADPH have already built on the data-sharing process by exchanging case surveillance data on all reportable conditions, not just COVID-19. They continue to consider opportunities to build on their success to further increase the effectiveness of state-local data sharing practices.

Also, with local syndromic data, MCHD can describe and share sub-county trends in non-reportable conditions like suicide, gun violence, and overdose for the first time.

This model of innovation and data modernization better equips the epidemiologists in MCHD to impact their community’s health outcomes.

Key contributors to this project include Alabama State Epidemiologist Sherri Davidson.