

Florida improves health equity through electronic case reporting



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CATEGORY: Electronic Case Reporting

Rapid implementation and scaling up of electronic case reporting (eCR) in Florida has resulted in a huge improvement in the completeness of race/ethnicity data as well as timeliness of detecting cases.

The “What”

Florida Department of Health’s use of **eCR has resulted in a rapid increase in health care organizations that can report electronically** – instead of by manual methods such as fax, data entry into a form or telephone – as well as health departments that can receive the reports. Traditional surveillance sources including electronic laboratory reporting and provider reporting often do not include race or ethnicity data, making it difficult and time-consuming to uncover potential health inequities.

Since Florida implemented eCR, they can rapidly receive and analyze cases of reportable disease, identify the people at highest risk, and ensure that public health can work to **reduce disease incidence and burden for any disproportionately affected communities.**

The “So What”

Information on the race and ethnicity of people who have diseases of public health importance helps shine a light on disparities in disease incidence, burden and mortality. Communities and people of color often suffer a disproportionately high burden of disease for a multitude of reasons. Once these inequities are known, efforts can be made to **identify their root causes and address the disparities to reduce or eliminate them.**

From August 2021 to November 2022, Florida received almost 195,000 electronic case reports for COVID-19. Among these, race and ethnicity were present in 88-89% of the cases. This compares to national data for COVID-19, where only roughly 65% have known race and ethnicity, and represents a vast improvement over the situation at the beginning of the pandemic, when only 50% of cases reported to the Centers for Disease Control and Prevention had known race and ethnicity. Electronic lab reports over the same timeframe in Florida also had substantially lower race and ethnicity completeness (70% for race, and 62% for ethnicity).

Between June and November 2022, the eCR was the first report to arrive in over half (54%) of the cases, usually within hours and before the electronic laboratory report or any other means of notification. The sooner the health department finds out about a case the sooner they can detect outbreaks and other public health threats – and the sooner they can act to reduce the spread of disease and prevent more cases.

The “Now What”

As eCR scales up, this project will have an enormous impact on Florida’s ability to detect and act on public health threats quickly and to assess disparities in incidence, burden and outcome of disease in relationship to race or ethnicity.



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