



Syndromic Surveillance Governance Council

April 28, 2016

1:00 p.m. – 3:00 p.m.

DSHS, 1100 West 49th Street, M-101

Austin, TX 78754

Conference Call Line: (877) 820-7831

Participant Passcode: 150459#

Attendees (* Council Members):

- *Raouf Arafat, MD, MPH, Assistant Director, Houston Health Department
- *Carol M. Davis, BS, MSPH, Program Manager, Health Service Region 7, DSHS
- *David W. Gruber, Assistant Commissioner, Division for Regional and Local Health Services (RLHS), DSHS
- *Peggy Hines, Health Information Technology Manager, DSHS
- *Philip Huang, MD, MPH, Medical Director, Austin/Travis County Health and Human Services
- *Diana Martinez, MPH, PhD, Program Manager, Harris Co. Public Health and Environmental Services
- *Belinda Medrano, MPH, Infection Preventionist, Valley Baptist Medical Center-Brownsville
- *Carl Vartian, MD, MS, Chief Medical Information Officer, HCA-Gulf Coast Division
- *Don Vickers, MD, CEO/Managing Partner, HPT Healthcare
- *Thaddeus Miller, MPH, Dr.PH, Associate Professor, UNTHSC, School of Public Health
- *Christopher Taylor, MPA Candidate, Executive Director, Cherokee County Public Health

Leo Achembong, BDS, MPH, Health Systems Integration Program Fellow, CPEA, DSHS
Mary Anderson, MD, MPH, Regional Medical Director, Health Service Region 9/10, DSHS
Eric Bakota, Houston Health Department
Roger Barker, Deputy Regional Director, Health Service Region 4/5N, DSHS
Carrie Bradford, PhD, Team Lead for Syndromic Surveillance, RLHS, DSHS
Deborah Bujnowski, PhD, MPH, RD, Harris Co. Public Health and Environmental Services
Savannah Carlson, Administrative Assistant for Syndromic Surveillance, RLHS, DSHS
Steve Eichner, HIT Policy Director, CPEA, DSHS
Tre Green, Syndromic Surveillance Project Manager, RLHS, DSHS
David Kolberson, Health Services Region 9/10, DSHS
Terry Lafon, Health Service Region 2/3, DSHS
David Leary, Health Service Region 4/5N, DSHS
Jyllisa Mabion, Epidemiologist for Syndromic Surveillance, RLHS, DSHS
Kevin McClaran, Epidemiologist, Health Service Region 1, DSHS
Wes McNeely, Houston Health Department
Sharon K. Melville, MD, MPH, Regional Medical Director, Health Service Region 7, DSHS
Vanessa Palacios, Health Services Region 9/10, DSHS
Ruben Sanchez, Application Portfolio Manager, RLHS, DSHS
Eunice Santos, Houston Health Department
Bill Stephens, Tarrant County Public Health
Paula Williams, Business Analyst, RLHS, DSHS

Council Members Not Present:

- *Linda K. Gaul, MPH, PhD, State Epidemiologist, Office of Epidemiology, DSHS
- *Santos Navarrette, Jr., MA, MBA, Assistant Health Administrator, Abilene-Taylor Co. Public Health District

1. Welcome and Introductions
 - New Staff:
 - Chris Meredith - TxS2 Enterprise Architect, Supporting Regional and Local Health Services Syndromic Surveillance Program
 - Ruben Sanchez - Regional Portfolio Manager, Supporting Regional and Local Health Services Syndromic Surveillance Program
 - Roll call of Council members and introduction of other attendees
2. Approval of January 28, 2016, Meeting Minutes
 - Minutes approved
3. Old Business
 - a. Agreements
 - For syndromic surveillance the HHSC DUA is not required.
 - Different versions of the MOU
 - Local health department MOU – terms associated with accessing data, sent to LHDs for comment, approved by legal.
 - Data Provider MOU – terms associated with sharing and accessing data, sent to THA and TORCH for review, approved by legal
 - User Access Agreements – For individual users that will log into system so they understand how they can use data, agreeing to the same terms for data usage as was in the MOU the facility signed, approved by legal.
 - There will be another version of an MOU for Houston Health Department and Tarrant County Public Health (need to draft for legal review), as well as if HIE's are used they will have their own MOU.
 - Instructions for execution – procedure will be discussed with the other policies and procedures below.
 - b. TxS2 Infrastructure
 - Uber Gateway (Health Services Gateway and Rhapsody) – amendment to existing contract, work involves configuring each connection from facilities
 - DCS/AWS (servers and data base hosting) – amendment to existing contract, infrastructure expected to be set up by May 6
 - JHUAPL (ESSENCE user application) – Sole source approval, will have servers up within the next week. Johns Hopkins will install software over the next couple weeks, and this will lead to our pilot launch in June in Region 8, and in July with the remaining state regions. We are only a month behind original schedule.
 - Last meeting had a large discussion about VPN and SFTP – SFTP is still preferred pathway, but will be discussed site by site with individual users.

- c. TxS2 Website
 - Working with Webservices to complete design and publishing of site
 - They have all the materials and were about to publish but the DSHS website as a whole went down, as soon as entire site is up the information will be up.
 - Will contain background information on syndromic surveillance and TxS2 system as well as policies and procedures related to TxS2
 - Due to DSHS website issues, not sure when the website will be up. Information is ready to be published as soon as website is back up. SSGC and Meaningful Use websites are both down.
- d. TxS2 Fact Sheet
 - Material in the fact sheet became the TxS2 website.
 - Website is being structured to be easy to print as needed for distribution.
- e. Statewide Webinars
 - February 8 – statewide call with LHDs and HSRs, 96 lines called in
 - March 29 – statewide call with hospitals, LHDs, and HSRs, 90 lines called in
 - People are getting on board now that they see movement.
- 4. New Business
 - a. Texas Hospital Association Article
 - Writing a story on TxS2 to be included in their May/June membership magazine.
 - Talks about the system, how the system will be working, and encourages hospitals to participate, this is encouraging.
 - b. Health Information Exchanges
 - Have not been able to meet with HASA yet due to scheduling conflicts.
 - Hope to be in conversation with other HIEs very soon to determine if this is a feasible option, but it is unclear the direction we are going with HIE's.
 - c. SSGC Membership Terms
 - Charter – Members Section 5c
 - Term. Appointed members serve a two-year term. However, select initial members will continue into a third year of membership so as to eliminate the possibility of the entire council consisting of new members in the third year. The positions selected for an initial three year term will be determined using a committee process to be developed by the council. Selections for future council members will take into account the category of the vacated positions to ensure diversity of viewpoints.
 - All members will continue to a third year as to not disrupt what has been going on for the development of the program.

d. Policies, Procedures, and Guidance Documents

- Developing Policy, Procedure, and Guidance Documents that will be posted to TxS2 website (based on accessibility requirements for web postings)
- Policies will need SSGC comment/approval
- What other topics will need a policy, procedure, or guidance document?
- Policies:
 - Governance Structure – we already have that in place.
 - Access and Confidentiality – will focus on mostly on MOU's but focus on how data can be stored and who will have access.
 - Data Sharing and Accessing – how we are set up so hospitals can see aggregate data, what regions and LHDs can see, and how data can be used.
 - Expectations for Data Providers – ensuring data quality from data providers.
 - IT Security Policies – general policies that are already in place.
- Procedures:
 - Data Provider and User Registration – how to register an intent to submit data and obtain the MOU for signature.
 - Onboarding and Messaging Guide – guidelines for messaging structure and onboarding.
 - Quarterly and Annual Reporting – reporting by both LHD's and Regions on how the system is being used, success stories, finding out about outbreaks because of alerts, and how to make it more useful.
 - Sharing data outside of MOU – data can't be shared unless approved through SSGC.
 - Question: Does the HHSC DUA trump this DUA or vice versa? The MOU is the only document, DUA is not being signed.
 - Information sharing between regions – Need to guide users of best practice.
- Generic Users Guide
- Chris Taylor (Cherokee County Public Health) - how does this policy list compare to other programs? We need to look into that.
- Users group could help with information sharing between regions, with regular conference calls.

e. TxS2 Registration, Pilot, Onboarding, and Training

- Registration – specific steps will be documented in a procedure as noted above.
- MOU is considered a contract, so TxS2 Users become a vendor with the state, needs to sign vendor information form to get in contracting system.
- We will send out courtesy copy of MOU but HHSC will send out official document for signature.
- Once returned to HHSC will be an official document.
- Intent to submit data survey.
- Electronic survey is a means for organizations to list people they want to have access to system to view data.
- Steve Eichner (DSHS) – This is not a survey in the sense of everyone has to respond, only a form not really a survey? Correct

- Bill Stephens (Tarrant County Public Health) – Is there active language for meaningful use in the MOU between state and data providers? Not in MOU but we will be doing all the communication. There is a line that says “provide documentation as required under Meaningful Use.”
- Pilot – Former RedBat users in San Antonio Metropolitan Health District and HSR 8.
- Going to expand this to beyond former RedBat users if needed, whoever is ready to go will be signed up.
- Onboarding order – after we finish pilot, we will start with Houston Health Department integration, Tarrant County Public Health Integration, and remaining facilities on first-come-first-serve basis (statewide).
- Training – virtual training to be conducted monthly, option to travel to Austin for training
- Dr Huang (Austin/Travis County Health and Human Services) - If we are with former TALHO system, will we stay there until get moved over, correct? Yes.

f. Topics from SSRACs for SSGC feedback

- 4 of the 8 regions met since last Governance Council meeting
 - Region 6/5 – February 24
 - Region 1 – March 10
 - Region 11 – April 20
 - Region 7 – April 25
- Questions/Topics from SSRACs
 - Regions still requesting agenda/discussion topics for their meetings.
 - Guidance on response to alerts
 - Chris Taylor (Cherokee County Public Health) – groups not getting from us what they really had hoped for, not a lot of guidance, feel as they’re unclear what their purpose is? At the end of day who is responsible for getting hospitals on board? What are they supposed to produce?
 - David Gruber (DSHS) – valid concern, some have taken off, some are not quite sure (rightfully). A question that we do need to address, as we get from theoretical to actual workings we should have a better understanding. How do we ensure the concept of a statewide system meets the needs of everyone? What are the end user requirements? The Council would prioritize needs for a future system. Once systems get up and running, taking advantage of people who are open and willing to participate we can get them more involved.
 - Belinda Medrano (Valley Baptist Medical Center – Brownsville) has enrolled 7 facilities and can help answer these specific questions.
 - Open line to answering Chris’s question and how can the Council address those needs:
 - Region 1 – Kevin McLaran (DSHS) – need to know role for HSRs and LHDs in implementation.
 - Region 2/3 – Terry Lafon (DSHS) – same question.
 - Region 4/5 – Roger Barker (DSHS) – Chris stated it well and appreciate involvement, have met fairly routinely, just continue on with good effort.
 - Harris County – have formed consortium, meeting quarterly from now on.

- Region 6/5 – working with Houston and Harris County.
- Region 7 – Dr. Melville (DSHS) – steering committee has met and recently adopted charter and members and officers have been elected. We are in the infancy of the steering committee, but the group shares a little of the feeling that was expressed previously that not quite sure what input and role should be. Many were on old TALHO system yet won't be on region 6/5 and are concerned about moving over to new system. Need more hospital representation on the committee. Some of the hospitals have stopped receiving feed from TALHO system and we need to figure out why. David Gruber (DSHS) – reiterate not shutting down the TALHO system until the new system is established. Wes McNeely (Houston Health Department) – any difficulties with the old TALHO system need to be directed to Wes McNeely.
- Region 9/10 – Dave Kolberson (DSHS) – committee has met, concern about how much system support will be needed. Meeting with Tarrant County and El Paso Health Department.
- Dr Huang (Austin/Travis County Health and Human Services) – keep thinking about how this structure can best function and be useful. Use local information to take advantage of people that use the system to make decisions.
- Carol Davis (DSHS) – when the system comes on line, should be a lot more tangible to discuss.
- Chris Taylor (Cherokee County Public Health) – Offered by LHDs to help with hospitals, DSHS regions because of the legality of the documents and LHDs because of the nature of relationship get together to talk to hospitals, who is responsible for getting the hospitals onboard? DSHS is facilitating the statewide effort but there is a desire to keep things that are working. If assistance is needed, DSHS would assist the LHD. The agreement is between DSHS and the local facility.
- Carrie Bradford (DSHS) – A packet will go out for regions and they can forward it to locals and this will have all documents for registration – will be emailed to regional offices. Official MOU for signature will come from HHSC PCS.
- More than 100 hospitals on call, do we anticipate people will join? We have done two surveys with hospitals to get information. Over 100 hospitals have indicated interest.
- Some hospitals may want to negotiate the terms of the MOU. Are we willing to negotiate the terms? Yes, we are prepared for that. That was also part of the purpose of vetting the document through THA and TORCH.
- Once there is a relationship between the hospitals and the state through the MOU, will the locals be kept informed? Yes. We are an administrator as opposed to operational component. We are enabling, not inserting. At the regional level, once the system gets up and running, the best way to get others on board is for others to say yes we like it and why. Demonstrating the successes of the system and how it is used would go a long way.

g. Topics from SSGC for SSRAC feedback

- Included in discussion above.

5. Open Discussion

- Included in discussion above.

6. Remaining 2016 Meeting Dates and Times

- The next meeting on July 28 needs to be rescheduled due to Operation Lone Star. An email will go out to reschedule this meeting.

July 28, 2016, 1:00

October 27, 2016, 1:00

7. Closing

- a. Meeting adjourned.