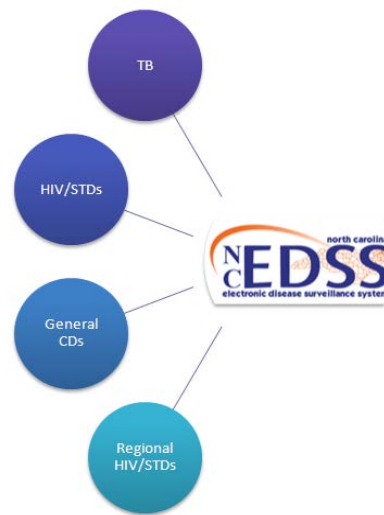


Towards an Integrated North Carolina Electronic Disease Surveillance System (NCEDSS)

PAST: In 2004, NC DPH utilized 13 CDC-supported surveillance systems to manage reportable infectious diseases. These 13 surveillance “silos” were managed by four separate units. Specifically, general communicable disease surveillance was managed by the General Communicable Disease Control Branch, TB surveillance and case management was operated by the TB Control Unit, and STD and HIV/AIDS systems were managed by the HIV/STD Prevention and Care Branch. Additionally, the HIV/AIDS and STD surveillance systems further operated as nine independent regional systems managed by the HIV/STD Regional Offices to support local partner services and case management.

PRESENT: Over the past eight years, staff from the Epidemiology Section, the Immunization Branch in the Women’s and Children’s Health Section, and the DPH IT group have successfully customized a commercial off-the-shelf surveillance and data management application called Maven (Consilience Software) to serve as North Carolina’s Electronic Disease Surveillance System (NCEDSS) solution. NCEDSS was designed to integrate disease reporting by all local health departments as well as case management for TB, HIV/AIDS and syphilis. In addition, NCEDSS was designed to both consume electronic laboratory reports and transmit disease reports to CDC on a routine basis. The integrated Communicable Disease Branch was then created to manage these programs and become the home for NCEDSS.

Since 2008, TB and general CD surveillance have been reported in NCEDSS statewide.



FUTURE: As of December, 2012 all current and historic HIV/AIDS and syphilis cases and all related partner services data were successfully merged into NCEDSS. We now have general communicable disease data (since 1993), HIV/AIDS reports (since 1984), syphilis reports (since 1999) and partner services and case management data (since 1993) integrated on one platform. NCEDSS now gives us the ability to monitor comorbidities and co-reporting for all reportable diseases. We are the first state to successfully integrate all legacy surveillance, case management, and partner services databases. As a result, these previously disparate programs are able to leverage screening, case reporting and management, and partner notification efforts. Moving forward, NC EDSS will become even more robust as it continues to consume electronic laboratory reports and interfaces with electronic health records.