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# *Georgia Southern Examines Barriers to EHR and HIE Implementation*

September 7, 2017

Electronic Health Records (EHRs) and Health Information Exchanges (HIEs) are changing surveillance and analytic operations within local health departments (LHDs) across the United States. The objective of this study was to analyze the status, benefits, barriers, and ways of overcoming challenges in the implementation of EHRs and HIEs in LHDs.

This study employed a mixed methods approach, first using the 2013 National Profile of LHDs survey to ascertain the status of EHR and HIE implementation across the US, as well as to aid in selection of respondents for the second, interview-based part of project. Next, forty-nine key-informant interviews of local health department staff were conducted. Data were coded thematically and independently by two researchers. Coding was compared and re-coded using the consensus definitions.

Twenty-three percent of LHDs nationwide are using EHRs and 14 percent are using HIEs. The most frequently mentioned benefits for implementation were identified as care coordination, retrieval or managing information, and the ability to track outcomes of care. A few mentioned barriers included financial resources, resistance to change, and IT related issues during implementation.

Despite financial, technical capacity, and operational constraints, leaders interviewed as part of this project were optimistic about the future of EHRs in local health departments. Recent policy changes and accreditation have implications of improving processes to affect populations served.

Overcoming the challenges in implementing EHRs can result in increased efficiencies in surveillance and higher quality patient care and tracking. However, significant opportunity cost does exist.

"Overcoming Barriers to Experience Benefits: A Qualitative Analysis of Electronic Health Records and Health Information Exchange Implementation in Local Health Departments," was recently published in The Journal for Electronic Health Data and Methods.

Dr. Karmen Williams, alumni of the Jiann-Ping Hsu College of Public Health at Georgia Southern University (JPHCOPH) was the lead author. Dr. Gulzar Shah, JPHCOPH Department Chair of Health Policy and Management, Dr. JP Leider, de Beaumont Foundation, and Dr. Akraki Gupta, JPHCOPH alumni were co-authors. The article is based off de Beaumont funded research conducted by Dr. Shah, Principal Investigator, and colleagues.

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# Georgia Southern Examines LBOH Support for Health Department Accreditation

September 7, 2017

Local boards of health (LBoHs) serve as the governance body for 71% of local health departments (LHDs). The purpose of this study was to assess the impact of LBoH governance functions and other characteristics on the level of LBoH support of LHD accreditation. Data from 394 LHDs that participated in the 2015 Local Boards of Health Survey were used for computing summative scores for LBoHs for domains of taxonomy and performing logistic regression analyses of whether or not LBoH supported the LHD accreditation. Our study showed that increased odds of an LBoH directing, encouraging, or supporting LHD accreditation activities were significantly associated with (a) a higher overall combined score measuring performance of governance functions and presence of other LBoH characteristics (adjusted odds ratio [AOR] = 1.05; $P < .001$); (b) a higher combined score for the Governance Functions subscale (AOR = 1.06; $P < .01$); (c) the "continuous improvement" governance function (AOR = 1.15; $P < .001$); and (d) characteristics and strengths such as board composition (eg, LBoH size, type of training, elected vs nonelected members), community engagement and input, and the absence of an elected official on the board (AOR = 1.14; $P = .02$).

The study led to the conclusion that LBoHs high performing LBoHs are more likely to support LHDs' accreditation. In addition, LBoHs were evenly split by thirds in their attention to Public Health Accreditation Board accreditation among the following categories: (a) encouraged or supported, (b) discussed but made no recommendations, and (c) did not discuss. This split might indicate that many LBoHs are depending on the professional leadership of the LHD to make the decision or that there is a lack of awareness. The study findings have policy implications for both LBoHs and initiatives aimed at strengthening efforts to promote LHD accreditation.

"Local Boards of Health Characteristics Influencing Support for Health Department Accreditation," was recently published in the Journal of Public Health Management & Practice.

Dr. Gulzar Shah, Department Chair for Health Policy and Management at the Jiann-Ping Hsu College of Public Health Georgia Southern University was the lead author. Dr. Sergey Sotnikov and Ms. Liza Corso, Office for State, Tribal, Local and Territorial Support, Ms. Carolyn Leep and Dr. Jiali Ye, National Association of County and City Health Officials, were co-authors.

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