

Attachment 7 (c)

National HIV Surveillance System (NHSS)

OMB # 0920-0573

2012 CSTE Pre-Conference Meeting Agenda

DAILY GLANCE

Start	End	Room	Function
7:30 AM	9:00 AM	Grand Ballroom B&C	Continental Breakfast
7:30 AM	4:00 PM	Pre-Function Grand Ballroom	Registration
7:30 AM	4:00 PM	Pre-Function Grand Ballroom	Cyber Café
8:00 AM	5:00 PM	215	Business Office
9:30 AM	3:30 PM	Grand Ballroom B&C	Exhibitor move-in
10:00 AM	10:30 AM	Grand Ballroom B&C	AM Break
12:00 PM	1:00 PM	Grand Ballroom B&C	Lunch provided by CSTE for session registrants
3:00 PM	3:30 PM	Grand Ballroom B&C	PM Break
5:00 PM	5:30 PM	Grand Ballroom B&C	Fellowship Meet-and-Greet (Fellows only)
5:30 PM	7:00 PM	Grand Ballroom B&C	Connections Reception

PRE-CONFERENCE SESSIONS

Start	End	Room	Function
8:00 AM	5:00 PM	204	HIV Surveillance Coordinators Workshop
8:30 AM	4:30 PM	208	Epidemiology Training Workshop – Introduction to Public Health Law
8:30 AM	5:00 PM	207	NASPHV Annual Business Meeting
8:30 AM	4:30 PM	216	National Meeting of Influenza Surveillance Coordinators
8:30 AM	5:00 PM	213	National Meeting of Occupational Health Epidemiologists
8:30 AM	5:00 PM	201	Overview of Multistate Foodborne Disease Outbreak Investigations Workshop
9:00 AM	5:00 PM	202	Critically Assessing the NNDSS Enterprise
9:00 AM	5:00 PM	214	National Meeting of Environmental Health Epidemiologists
10:00 AM	3:00 PM	206	Healthcare Associated Infections (HAI) Workshop
10:00 AM	5:00 PM	209	The Role of Epidemiology in Community Health Assessments Workshop
1:15 PM	5:15 PM	203	BioSense 2.0 Workshop
1:30 PM	4:30 PM	205	Change is Coming: The New World of ICD-10-CM

POSTER PRESENTATIONS

Start	End	Room	Function
12:00 PM	7:00 PM	Grand Ballroom B&C	Poster Display for Award Finalists and Students
5:30 PM	6:00 PM	Grand Ballroom B&C	Student Poster Presentations

1:15 pm – 5:15 pm

BIOSENSE 2.0 WORKSHOP

203

This interactive workshop will update attendees on the current status of BioSense 2.0. The workshop will begin with an overall BioSense Program update. Several state and local health departments will present their experiences implementing and utilizing BioSense 2.0. CSTE will also provide an update on their member outreach activities and provide a facilitated forum for attendees to discuss BioSense 2.0 application features and the implementation process.

LEARNING OBJECTIVES:

- Know what to expect when implementing BioSense 2.0 in your jurisdiction
- Understand the structure and purpose of the BioSense 2.0 Governance Group
- Understand current and future scope of the BioSense 2.0 Program

MODERATORS:

Taha Kass-Hout, Centers for Disease Control and Prevention
Beth Dunbar, Council of State and Territorial Epidemiologists

AGENDA

12:00 – 1:15 pm	Lunch (<i>boxed lunches will be provided for session registrants</i>)
1:15 – 1:20 pm	Welcome and Introduction – Taha Kass-Hout, BioSense Program Manager, CDC
1:20 – 2:40 pm	Presentations from BioSense Users Three BioSense 2.0 users will detail their experience implementing and using BioSense within their jurisdiction (<i>Presentation format with Q&A</i>)
2:40 – 3:00 pm	BioSense Governance Update – Richard Hopkins and Bryant Karras, CSTE representatives on the BioSense Interim Governance Group (<i>Presentation format with Q&A</i>)
3:00 – 3:30 pm	Break (refreshments provided)
3:30 – 3:45 pm	CSTE Update – Beth Dunbar, CSTE National Office (<i>Presentation format with Q&A</i>)
3:45 – 5:15 pm	Breakout Small Group Discussions Participants will select four topics of interest and rotate through facilitated, small group discussions on each area. Topics will include subjects related to implementation, the application interface, environment security, the BioSense 2.0 Data Use Agreement, novel uses of the BioSense 2.0 cloud, and more.

1:30 pm – 4:30 pm

CHANGE IS COMING: THE NEW WORLD OF ICD-10-CM

205

Within the next few years, the ICD-9-CM code sets used by healthcare agencies to report medical diagnoses and inpatient procedures will be replaced by the ICD-10-CM code sets. In preparation for this transition, the Injury Subcommittee will be hosting a half-day workshop on the change from ICD-9-CM to ICD-10-CM and how this change will impact public health. The workshop will focus on the major differences between these two code sets and will offer suggestions for assessing the impact on data analysis and trends, using examples from the areas of injury, environmental health, and chronic disease. This workshop is open to all meeting attendees; participants from any discipline will benefit from attending this workshop.

AGENDA

12:00 – 1:30 pm	Lunch (<i>boxed lunches will be provided for session registrants</i>)
1:30 – 1:45 pm	Introductions
1:45 – 2:15 pm	<p>Overview of ICD-10-CM</p> <p>The session will provide an overview of:</p> <ul style="list-style-type: none"> - Differences between the ICD-10-CM and the ICD-10 (additional digits) - Differences between the ICD-9-CM and the ICD-10-CM highlighting specific chapters (injury, chronic diseases, infectious diseases) including: <ul style="list-style-type: none"> Main chapters/Structural description/comparison to ICD-9-CM Major content area realignments
2:15 – 3:00 pm	<p>Impact of the ICD-10-CM on Public Health Surveillance and Analysis</p> <p>The session will provide insight into the some of the implications of transitioning to ICD-10-CM and ICD-10-PCS including:</p> <ul style="list-style-type: none"> - Redesign or development of new systems or software programs - Need for documentation in order to use the specificity available in the new codes or redesign of forms - Vendor readiness - External cause of injury - groupings and differences from ICD-9-CM (discussion to continue during a Roundtable on Tuesday, June 5)
3:00 – 3:15 pm	Break
3:15 – 4:30 pm	<p>Preparing for Change: tools to help you make the transition</p> <ul style="list-style-type: none"> - General Equivalence Maps (ICD-9-CM and ICD-10-CM, ICD-10 and ICD-10-CM) - Other resources (CDROM, on-line, instructional courses, suggested best coding manuals, etc.)



9:00 am – 5:00 pm

202

CRITICALLY ASSESSING THE NNDSS ENTERPRISE: A JOINT SESSION SPONSORED BY CSTE AND THE CDC

The National Notifiable Diseases Surveillance System (NNDSS) is a critical source of data used by state, local, and territorial health departments, CSTE, and CDC for program planning and evaluation, policy development, and disease prevention and control. This workshop will examine the NNDSS in its entirety and each of the components necessary to facilitate disease surveillance including electronic laboratory reporting, disease surveillance and investigation, standardized analysis and reporting across local, state, territorial, and federal agencies supporting public health. Each topic area will involve stakeholders from the respective agencies and focus on practical, real-world challenges and solutions, utilizing the latest technology and best practices to drive public health processes. This session brings together public health informatics and subject matter experts in applied epidemiology to enable synergy across the continuum.

LEARNING OBJECTIVES:

- Develop practical understanding of all levels of the NNDSS enterprise
- Identify common problems and potential shared solutions related to public health informatics
- Showcase solutions and best practices implemented across local, state, territorial public health authorities on electronic laboratory reporting, disease surveillance and investigation, standardized analysis, and reporting
- Develop a foundation for ongoing public health informatics discussion and collaboration

FACILITATORS:

Kathleen Gallagher - Morning
Perry Smith - Afternoon

AGENDA

9:00 – 9:15 am	Overview of NNDSS – Kathy Gallagher
9:15 – 10:00 am	Overview of the NNDSS evaluation and assessments performed in 2011 - NNDSS evaluation and recommendations from the External Evaluation Team Perry Smith and Jeff Kriseman - NNDSS survey and focus group meetings with CDC Programs – Ruth Jajosky
10:00 – 10:30 am	Break
10:30 – 10:45 am	CDC Office of Infectious Disease perspective about surveillance issues and future considerations
10:45 – 11:00 am	NNDSS strategic redirection, priorities, and next steps – Kathy Gallagher
11:00 – 12:00 pm	Facilitated NNDSS Discussion (Open Forum)

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12:00 – 1:00 pm

Lunch (*boxed lunches will be provided for session registrants*)

1:00 – 4:00 pm

Local, state, and territorial stakeholder perspectives about current surveillance issues, practical solutions, and considerations for the future. The presenters will consist of state, local, territorial and federal partners.

- Electronic Laboratory Reporting
- Disease Surveillance and Investigation
- Standardized Analysis
- Reporting

4:00 – 4:45 pm

Facilitated NNDSS Discussion (Open Forum)

4:45 – 5:00 pm

Establishing a user community



8:30 am – 4:30 pm

208

EPIDEMIOLOGY TRAINING WORKSHOP INTRODUCTION TO PUBLIC HEALTH LAW

CSTE, in collaboration with the Centers for Disease Control and Prevention (CDC), is offering a workshop on public health law. Law has played a crucial role in many of the public health successes of the past century and its importance to the daily work of local, state, and federal health agencies is increasing. This workshop will provide an introduction to the most important principles in American public health law.

The workshop will cover the philosophical underpinnings of the law; characteristics of the law, such as the types of legal authority and the role of precedent; courts and judges; the structure and function of the United States Constitution as applied to public health; federalism and the division of authority between the state and federal governments; and limitations on public health action imposed by individual rights granted by the Constitution.

The workshop is targeted toward public health professionals with no previous training in law.

LEARNING OBJECTIVES:

At the end of the course, participants should:

1. appreciate the legal basis of United States public health practice,
2. understand at an introductory level how law creates the structure of public health governmental entities in the United States, and the relationships among them,
3. grasp the omnipresent tension in public health between governmental power and individual liberties,
4. for a few disciplines within public health practice, have an introductory understanding of how law influences decision-making.

AGENDA

8:30 – 9:15 am	Introduction The underpinnings of public health law
9:15 – 10:00 am	The Constitution and public health: part I
10:00 – 10:30 am	Break
10:30 – 12:00 pm	The Constitution and public health: part II
12:00 – 1:00 pm	Lunch (<i>boxed lunches will be provided for session registrants</i>)
1:00 – 3:00 pm	Individual rights and public health action
3:00 – 3:30 pm	Break and handouts for exercise
3:30 – 4:30 pm	Exercise: Incident at Airport X

SUNDAY  JUNE 3 2012

10:00 am - 3:00 pm

206

HEALTHCARE ASSOCIATED INFECTIONS (HAI)
PREVENTION WORKSHOP

This pre-conference workshop is geared toward HAI Program directors and any health department staff that are currently engaged or interested in HAI Prevention and Response activities. The workshop will be interactive, with health departments sharing their experiences and facilitated active dialogue among participants.

Sessions will include brief presentations and discussion on the following topics and themes:

- From outbreaks to prevention: Injection safety leads the way (case studies)
- Regional approaches for controlling the spread of CRE and other superbugs
- Prevention collaboratives: Not just for short-term acute care anymore (e.g., dialysis, long-term care)
- Go West, Young Program: ACA-funded projects blaze new trails
- Prevention research: A new land of opportunity?
- Friends old and new: Leveraging efforts through partners (local, state, federal)

By the end of the workshop, attendees will have a better understanding of how HAI programs and other health department activities can provide data for action and help drive HAI elimination, across the continuum of care.

SUNDAY JUNE 3 2012  PRE-CONFERENCE



8:00 am – 5:00 pm

HIV SURVEILLANCE COORDINATORS WORKSHOP

204

The 2012 HIV Surveillance Coordinators Pre-Conference Workshop will provide an opportunity for HIV Surveillance Coordinators from across the country and staff from CDC's HIV Incidence and Case Surveillance Branch to discuss the rapidly changing world of HIV surveillance, share best practices, and plan for the future.

AGENDA

8:00 – 8:15 am	Welcome
8:15 – 9:30 am	Shifting Surveillance Paradigms: <ul style="list-style-type: none"> - How are programs using surveillance data to evaluate progress? - What are people looking to surveillance for?
9:30 – 10:00 am	Open Discussion
10:00 – 10:15 am	Break
10:15 – 11:30 am	Ways to Analyze Data to Monitor Progress on the National HIV/AIDS Strategy
11:30 – 12:00 pm	Open Discussion
12:00 – 1:00 pm	Lunch (<i>boxed lunches will be provided for session registrants</i>)
1:00 – 2:15 pm	Integration Forum: <ul style="list-style-type: none"> - Q&A style session guided by moderator to answer attendees' specific questions
2:15 – 3:00 pm	New Cooperative Agreement
3:00 – 3:15 pm	Break
3:15 – 3:45 pm	CSTE Position Statement: <ul style="list-style-type: none"> - Review of changes in proposed position statement
3:45 – 4:15 pm	Open Discussion
4:15 – 4:45 pm	CSTE Business Meeting: <ul style="list-style-type: none"> - CSTE's HIV-related activities - CSTE membership
4:45 – 5:00 pm	Wrap up
5:00 pm	Adjourn



SUNDAY  JUNE 3 2012

8:30 am - 5:00 pm

NASPHV ANNUAL BUSINESS MEETING

207

First incorporated in 1953, the National Association of State Public Health Veterinarians (NASPHV) is an organization of professionals with expertise in the prevention and control of zoonotic disease, as well as various other areas of veterinary public health. The majority of NASPHV members are veterinarians with advanced training and degrees in public health, and hold federal, state or local government positions. Because of the many members in common, shared goals and close working association with CSTE, NASPHV holds their annual meeting in conjunction with the CSTE Annual Conference. The meeting agenda includes organizational business, committee and compendium reports, brief presentations by members or others concerning issues of interest or concern, and a roundtable report by members as to the main issues/problems currently being faced in their state or territory. CSTE conference attendees are welcome to attend.

SUNDAY JUNE 3 2012  PRE-CONFERENCE



9:00 am – 5:00 pm

214

NATIONAL MEETING OF ENVIRONMENTAL HEALTH EPIDEMIOLOGISTS

The cross-cutting, state-based pre-conference workshop will cover several environmental health areas relevant to all states.

AGENDA

9:00 – 10:00 am

Strategic Planning Brainstorming Session: Priorities for Preserving Environmental Programs

This pre-workshop discussion will address some of the on-going problems that have resulted from decreased federal support for environmental health, with an emphasis on environmental epidemiology. A panel of state/local environmental epidemiologists will first review previously implemented solutions to decreased financial support for environmental programs and then describe future anticipated impacts of continued budget cuts on existing programs, such as lead/healthy homes and preparedness, to better understand the programmatic response choices public health agencies have made thus far. Everyone will be invited to identify/discuss strategies for effectively prioritizing important environmental health programs, and how to communicate these priorities to decision-makers.

10:00 – 10:30 am Welcome/ Introductions
Michael Heumann, Oregon

10:30 – 12:00

Cancer Cluster Investigation Guidelines and Communications Toolkit

Moderators: Kanta Sircar, Lauren Lewis, Vivi Abrams, Federico Feldstein, CDC

In 2012, two sets of cancer cluster investigation guidelines, in regards to cancer cluster investigations, will be published. The first is an update of the 1990 Morbidity and Mortality Weekly Report (MMWR) entitled “CSTE/ CDC Guidelines for Investigating Cancer Clusters.” The second is entitled “Cancer Clusters: A Toolkit for Communicators” and is a collaboration of CDC and The National Public Health Information Coalition. The purpose of this session is to describe these new resources and discuss how state and local public health official who respond to public concerns related to cancer can incorporate these approaches. The panel will consist of members of both workgroups and will outline key aspects of both documents. Presenters will teach attendees about the content and uses of communicators’ tool kit, and lead discussion on how epidemiologists can work together with communicators at the state level to improve communication with the community during a cancer cluster investigation. In addition, attendees will learn about updates to the MMWR, including the 4 stage process.

10:30 – 10:40 am CSTE/CDC Guidelines for Investigating Cancer Clusters
Kanta Sircar, CDC/NCEH

10:40 – 10:50 am Cancer Clusters: A Toolkit for Communicators -- A Collaboration of the Centers for Disease Control and Prevention and the National Public Health Information Coalition
Vivi Abrams, CDC/NCEH

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- 10:50 – 11:50 am Case Study: Facilitated group discussion
- 11:50 – 12:00 pm Perspectives on a cancer cluster: Notes from the field
TBA
- 12:00 – 1:00 pm Lunch (*boxed lunches will be provided for session registrants*)

1:00 – 3:00 pm

Environmental Public Health Tracking: Role in Prevention and Public Health Response

Moderator: Ekta Choudhary, CDC

Environmental Public Health Tracking is the ongoing collection, integration, analysis, interpretation, and dissemination of data from environmental hazard monitoring, and from human exposure and health effects surveillance. Since the network launched, public health officials have used the Tracking Network to implement prevention strategies and to respond to public health concerns. For example, state and local Tracking Programs have used their public and secure portals to improve emergency response in New Mexico; answer community concerns about cancer and potential links to environmental hazards in Maryland; target school-based asthma prevention strategies in Pennsylvania; and reduce exposure from arsenic-contaminated drinking water in Oregon. This session will include a few examples of how the Tracking Network has been used and a discussion focused on identifying additional content and functionality for the Tracking Network to improve its utility for public health prevention and response activities.

SPEAKERS:

- 1:00 – 1:25 pm Mark Werner, Wisconsin Department of Health Service
- 1:25 – 1:50 pm Blair Sevcik, Minnesota Department of Health
- 1:50 – 2:15 pm Barbara Toth, New Mexico Department of Health
- 2:15 – 2:40 pm Glen Patrick and Juliet VanEenwyk, Washington State Department of Health
- 2:40 – 3:00 pm Question & Answer
- 3:00 – 3:30 pm Break



CONCURRENT SESSIONS – PLEASE CHOOSE ONE TO ATTEND

3:30 pm – 5:00 pm

214

EXERCISE, EXERCISE, EXERCISE: CHEMICAL INCIDENT TABLETOP

Moderators: Betsy Kagey, GA DPH, Rachel Roisman, CDPH, Maureen Orr, CDC/NCEH/ATSDR, and Amy Wolkin, CDC/NCEH

Attendees will engage in a Tabletop Exercise on the epidemiologic response to a disaster scenario to initiate problem solving discussions. The objectives of this workshop would be to identify questions that need to be asked and answered with regard to:

- Collecting short term and long-term data on victims and the exposed population
- Actions needed to provide situational awareness for timely public health response and
- Identifying the needs, steps and capability (capacity) for registry development

OR

3:30 pm – 5:00 pm

213

DENOMINATORS FOR ENVIRONMENTAL AND OCCUPATIONAL HEALTH SURVEILLANCE: 2010 CENSUS AND OTHER SOURCES

The final session of the day will provide training on using national databases for denominator data. Speakers will provide descriptions, including strengths and weaknesses, of the primary sources of demographic and employment data. Presenters will describe several sources of data that may be used as denominators in the calculation of general population and occupational injury and illness rates and demonstrate how the data can be accessed.

3:30 – 4:15 pm	U.S. Census, American Community Survey (ACS) Jerry O’Donnell, U. S. Census Bureau
4:15 – 4:45 pm	Current Population Survey (CPS) Larry Jackson, NIOSH Division of Safety Research
4:45 – 5:00 pm	Quarterly Census of Employment and Wages (QCEW), Occupational Employment Statistics (OES), County Business Patterns (CBP), US Department of Agriculture – Census of Agriculture John Myers, NIOSH Division of Safety Research
5:00 pm	Adjourn
6:30 pm	Environmental/Occupational/Injury Social Event: Upstream Brewing Company, 514 South 11 th Street

8:30 am – 4:30 pm

216

NATIONAL MEETING OF INFLUENZA SURVEILLANCE COORDINATORS

CSTE, in collaboration with the Centers for Disease Control and Prevention, will be hosting an Influenza Surveillance Coordinators Workshop on Sunday, June 3, 2012 in conjunction with the CSTE Annual Conference. The purpose of the workshop is to provide a forum for jurisdictions and CDC to discuss current themes in influenza surveillance and to strengthen relationships and cooperation between influenza programs from health departments around the country.

Invited participants include Influenza Coordinators from state, territorial, and large local health departments. Participants will also include representatives from the Centers for Disease Control and Prevention. This workshop is open to all registered attendees.

LEARNING OBJECTIVES:

- Determine “best practice” strategies for influenza surveillance in health departments considering current and approaching budget constraints
- Identify and discuss epidemiologic concerns related to recent novel influenza case detections, including case definition, laboratory methods, and the local and national response
- Provide a forum for discussion of current themes and events in the field of influenza surveillance epidemiology and for collaboration between surveillance coordinators and CDC

AGENDA

8:30 – 9:00 am	“Meet-and-greet” with new influenza coordinators <i>All influenza workshop participants are welcome and encouraged to attend</i>
9:00 – 9:10 am	Welcome and Introductions – Lynnette Brammer
9:10 – 9:30 am	Review of recent novel influenza detections and response – Scott Epperson
9:30 – 10:00 am	Current issues in novel influenza detection – Lyn Finelli
10:00 – 10:30 am	Break
10:30 – 12:00 pm	Best practices on a restricted budget – Elizabeth Bancroft
12:00 – 1:30 pm	Lunch – Regional Networking Session <i>Boxed lunches will be provided for session registrants</i>
1:30 – 2:00 pm	Summary of regional discussions
2:00 – 2:30 pm	Novel influenza case definition background and discussion – Chris Hahn
2:30 – 3:00 pm	IISP update and overview of non-influenza respiratory viruses – Ashley Fowlkes
3:00 – 3:30 pm	Break
3:30 – 4:00 pm	International influenza programs and differences from the U.S. – Krista Kniss
4:00 – 4:15 pm	International influenza program consultations – Ruth Lynfield
4:15 – 4:30 pm	Wrap-Up



8:30 am – 5:00 pm

213

NATIONAL MEETING OF OCCUPATIONAL HEALTH EPIDEMIOLOGISTS

A pre-conference workshop will be hosted by the Occupational Health Subcommittee focusing on issues that overlap with the broader public health community. The morning session will feature presentations by invited technical, academic, and industry speakers on occupational risks and safety training strategies representative of the Midwest.

AGENDA

8:30 – 9:00 am Welcome and Introduction
Thomas W. Largo, Michigan Department of Community Health

9:00 – 12:00 pm

Agricultural Safety & Health: Midwest Partnership Experiences that Increase Program Impact

Moderator: Kathy Leinenkugel, Iowa Department of Public Health

9:00 – 10:00 am Agricultural injury surveillance in Iowa: Results of collaborations between academic and government organizations
Fred Gerr, University of Iowa, Great Plains Center for Agricultural Health
Marizen Ramirez, University of Iowa, Iowa Injury Prevention Research Center, IA FACE

10:00 – 10:30 am Break

10:30 – 11:30 am Making an Impact – Innovative Delivery Strategies for Ag Health & Safety
Carolyn Sheridan, AgriSafe Network
Risto Rautiainen, University of Nebraska, Central States Center for Agricultural Safety & Health

11:30 – 12:00 pm Question and Answer Panel Discussion (above speakers)

12:00 – 1:30 pm Lunch (*boxed lunches will be provided for session registrants*)

1:30 – 3:00 pm

Connecting Public Health Surveillance and Electronic Health Records (EHRs)

Moderator: Marie H. Sweeney, CDC/NIOSH

In the first session of the afternoon, speakers will discuss activities related to public health and electronic health records and provide a synopsis of the IOM Report *Incorporating Occupational Information in Electronic Health Record*; describe activities in response to IOM report at the National Institute for Occupational Safety and Health (NIOSH); as well as state and CSTE activities.

1:30 – 1:45 pm Occupational Public Health and Electronic Health Records: Introduction and general overview
Margaret (Peggy) Filios, CDC/NIOSH, Co-Chair NIOSH Electronic Health Records (EHR) Workgroup

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- 1:45 – 2:00 pm Collecting and using EHR data for public health surveillance: Roles of states
Tom Safranek, State Epidemiologist, Nebraska Department of Health and Human Services; President, CSTE

- 2:05 – 2:20 pm Obtaining occupational information in Electronic Lab Reports (ELRs): perspective from an ABLES state
Susan F. Payne, Occupational Lead Poisoning Prevention Program, California Department of Public Health

- 2:20 – 2:35 pm Synopsis of NIOSH EHR activities
Kerry Souza, CDC/NIOSH

- 2:35 – 3:00 pm Discussion

- 3:00 – 3:30 pm Break

3:30 – 5:00 pm

Denominators for Environmental and Occupational Health Surveillance: 2010 Census and other sources

Moderator: Thomas W. Largo, Michigan Department of Community Health

The final session of the day will be a training on using national databases for denominator data. Speakers will provide descriptions, including strengths and weaknesses, of the primary sources of demographic and employment data. Presenters will describe several sources of data that may be used as denominators in the calculation of general population and occupational injury and illness rates and demonstrate how the data can be accessed.

- 3:30 – 4:15 pm U.S. Census, American Community Survey (ACS)
Jerry O'Donnell, U. S. Census Bureau

- 4:15 – 4:45 pm Current Population Survey (CPS)
Larry Jackson, NIOSH Division of Safety Research

- 4:45 – 5:00 pm Quarterly Census of Employment and Wages (QCEW), Occupational Employment Statistics (OES), County Business Patterns (CBP), US Department of Agriculture – Census of Agriculture
John Myers, NIOSH Division of Safety Research

- 5:00 pm Adjourn

- 6:30 pm Environmental/Occupational/Injury Social Event: Upstream Brewing Company, 514 South 11th Street



8:30 am – 5:00 pm

201

OVERVIEW OF MULTISTATE FOODBORNE DISEASE OUTBREAKOUT INVESTIGATIONS WORKSHOP

The 2012 Overview of Multistate Foodborne Disease Outbreak Investigations Pre-conference Workshop will provide an opportunity to learn the basics of how to investigate a multistate foodborne disease outbreak. This workshop is intended for state and local public health professionals and others involved with these outbreaks. The goals for attendees are to identify the source of the outbreak, prevent additional illnesses, and to identify gaps in our food safety systems helping to prevent similar outbreaks from occurring in the future. This workshop will be tailored towards individuals looking for a general overview and understanding of multistate foodborne disease outbreak investigations and will cover the step-by-step process of investigating these outbreaks. Topics to be covered include who is involved in multistate investigations, detecting possible outbreaks using PulseNet, detecting and finding cases during the outbreak, hypothesis generation methods, analytic studies, and reporting outbreaks to the National Outbreak Reporting System (NORS).

AGENDA

7:30 – 8:30 am	Registration and Breakfast
8:30 – 8:45 am	Welcome, Introductions, and Course Objectives
8:45 – 10:00 am	Part I: Outbreak Detection - Surveillance and the role of PulseNet - Steps to investigate a multistate outbreak
10:00 – 10:30 am	Break
10:30 – 12:00 pm	Part II: Outbreak Acceleration - Generating hypotheses, role of subclusters, and standard elements for hypothesis generation - Utilizing new technologies in multistate outbreaks: Sharepoint and Palantir - Testing hypotheses and analytic epidemiologic approaches - Role of tracebacks in hypothesis testing
12:00 – 1:00 pm	Lunch (<i>boxed lunches will be provided for session registrants</i>)
1:00 – 3:00 pm	Part III: Outbreak Deceleration/Resolution - Reconstructing how and when contamination occurred - Coordinating traceback activities between state and federal partners - Regulatory action - Role of environmental health assessments
3:00 – 3:30 pm	Break
3:30 – 4:45 pm	Part III: Outbreak Deceleration/Resolution (continued) - Outbreak reporting to the National Outbreak Reporting System (NORS) - Communicating with the public - Root cause analysis
4:45 – 5:00 pm	Wrap up

10:00 am – 5:00 pm

209

THE ROLE OF EPIDEMIOLOGY IN COMMUNITY HEALTH ASSESSMENTS WORKSHOP

Community Health Assessments (CHAs) are important tools for understanding and improving population health, reducing disparities, and preparing for and responding to public health emergencies. Two recent developments have increased interest in CHAs. First, the 2010 Patient Protection and Affordable Care Act (ACA) requires nonprofit hospitals to conduct community health needs assessments (CHNAs) every three years. The CHNAs must represent the broad interests of the community and include individuals with expertise in public health. Second, the voluntary public health accreditation standards, launched in 2011, require a comprehensive CHA and community improvement plan (CHIP). CHA and CHIP are two of the prerequisites for state and local health departments wishing to apply and are included within the accreditation standards. CHAs are based on epidemiological methods and often require competencies in a range of disciplines including chronic disease, infectious disease, injury, and environmental health.

The first half of the workshop will provide an overview of CHA requirements with a focus on the role of state and local epidemiologists; opportunities and potential benefits of collaboration; available resources and practical tools for data collection, analysis, and interpretation; and case studies and lessons learned from the field. These presentations will be followed by interactive learning opportunities conducted in small groups. The utility of available resources and tools as well as participant identified needs for additional training, tools, and/or resources relating to CHAs may also be discussed. The workshop will end with a facilitated discussion of the practical application of CHAs as foundation for health improvement planning and other health protection activities.

LEARNING OBJECTIVES:

- Understand the requirements for CHAs and CHIPs and opportunities for collaboration.
- Understand the utility of CHAs for:
 - ◊ improving community health;
 - ◊ addressing upstream health determinants including social and environmental factors;
 - ◊ responding to natural disasters and other public health emergencies.
- Identify available planning models (e.g., MAPP), data resources, and tools including EpiInfo and Community Assessment for Public Health Emergency Response (CASPER).
- Learn lessons from the field.

AGENDA

Opening Plenary

10:00 – 10:20 am	Overview of Community Health Assessment
10:20 – 10:40 am	Assessment/Accreditation, including existing state requirements
10:40 – 11:00 am	Prioritization Case Study
11:00 – 12:00 pm	Prioritization Exercise/ Worksheet – assign into 5 targeted community groups
12:00 – 1:00 pm	Lunch (<i>boxed lunches will be provided for session registrants</i>)



Round-Robin Breakout Sessions

1:00 – 2:00 pm

Room 209

Session I: Data resources, Tools (Epi INFO 7), Methods, Evaluation, Monitoring with exercises relating to targeted group

Hill Room, Hilton Omaha

Session II: Needs Assessment, Community Involvement, Partner Engagement, Asset Mapping, resources

2:00 – 2:30 pm

Break

2:30 – 3:30 pm

Attendees switch Sessions

3:30 – 3:45 pm

Break

3:45 – 5:00 pm

Discussion/ Wrap-up

- Health improvement planning
- Priorities exercise among assigned targeted communities into groups
- Report out from exercise tables to larger group
- Q&A, wrap-up

5:00 pm

Adjourn

DISPLAY FROM

SUNDAY, JUNE 3 at 12pm thru TUESDAY, JUNE 5 at 4pm



POSTER AWARD FINALIST DISPLAY

(CenturyLink Center Omaha)

GRAND BALLROOM B & C

CHRONIC DISEASE / MCH / ORAL HEALTH

PRESENTATIONS ON MONDAY, JUNE 4 AT 3:30PM

- Board #111 **1315530**
Creating a lead risk map using parcel level data *
Robert Graff, Idaho Department of Health and Welfare
- Board #112 **1321868**
Seasonality of asthma emergency department visits among Tennessee children *
Lindsey Jones, Tennessee Department of Health
- Board #113 **1324466**
Access to care and its impact on health outcomes among Utah's adult asthmatic population *
Celeste Beck, Utah Department of Health
- Board #114 **1326165**
Using University of Nebraska Alumni network to evaluate a statewide awareness campaign promoting colorectal cancer screening *
Jianping Daniels, Nebraska Department of Health and Human Services
- Board #115 **1327297**
Getting here from there: Examples of how state health departments are using GIS to address heart disease, stroke and other chronic diseases *
Joshua Tootoo, University of Michigan

CROSS CUTTING

PRESENTATIONS ON MONDAY, JUNE 4 AT 3:30PM

- Board #116 **1322145**
Measuring the burden of excessive alcohol consumption among Michigan residents: Alcohol-attributable hospitalizations, 2001-2010 *
Katy Gonzales, Michigan Department of Community Health
- Board #117 **1327412**
Using market research data to explore alcohol-related behaviors among Michigan adults, 2011 *
Katy Gonzales, Michigan Department of Community Health



DISPLAY FROM

SUNDAY, JUNE 3 at 12pm thru TUESDAY, JUNE 5 at 4pm



POSTER AWARD FINALIST DISPLAY

(CenturyLink Center Omaha)

GRAND BALLROOM B & C

CROSS CUTTING *(Continued)*

PRESENTATIONS ON MONDAY, JUNE 4 AT 3:30PM

- Board #118 **1326922**
How raising rabies awareness impacted vaccination coverage among domestic pets, El Paso County, CO 2009-2011 *
Amanda Baker, El Paso County Public Health
- Board #119 **1332692**
Public sector principles of data governance: A case study of the Iowa Department of Public Health*
Meghan Harris, Iowa Department of Public Health

ENVIRONMENTAL HEALTH / OCCUPATIONAL HEALTH / INJURY

PRESENTATIONS ON TUESDAY, JUNE 5 AT 10AM

- Board #121 **1326488**
Adult lead poisoning cluster from ayurvedic product usage in Iowa, 2011 *
Kathy Leinenkugel, Iowa Department of Public Health
- Board #122 **1331130**
Associations between composite weather factors and water/foodborne disease hospitalizations in summer in New York State from 1991 to 2004 *
Shao Lin, New York State Department of Health
- Board #123 **1326952**
Using an administrative workers' compensation claims database for occupational health surveillance in California: Validation of a case classification scheme for carpal tunnel syndrome *
Lauren Joe, California Department of Public Health
- Board #124 **1326678**
Distribution of influenza like illness (ILI) by occupation in Washington State, September 2009 - August 2010 *
Naomi Anderson, Washington State Department of Labor and Industries
- Board #125 **1322267**
Glare-related motor vehicle crash trends in Nebraska, 2002-2009 *
Jennifer Marcum, Nebraska Department of Health and Human Services



SUNDAY  JUNE 3 2012

DISPLAY FROM

SUNDAY, JUNE 3 at 12pm thru TUESDAY, JUNE 5 at 4pm



POSTER AWARD FINALIST DISPLAY

(CenturyLink Center Omaha)

GRAND BALLROOM B & C

INFECTIOUS DISEASE

PRESENTATIONS ON MONDAY, JUNE 4 AT 10AM

- Board #101 **132220**
Association of asthma with seasonal and pandemic H1N1 influenza among children with medically attended respiratory illness in a Wisconsin population cohort — 2007-2009 *
Sarah Kemble, Minnesota Department of Health
- Board #102 **1326288**
Legionella outbreak associated with solar rooftop water heating system —Maryland, 2011 *
Maria Said, Maryland Department of Health and Mental Hygiene
- Board #103 **1326715**
Population-based sentinel surveillance among persons reported with *N. gonorrhoeae*; Addressing gaps in case reporting data with the STD Surveillance Network (SSuN) *
Mark Stenger, Centers for Disease Control and Prevention
- Board #104 **1331587**
Human tularemia in the United States: 2001-2010 *
Kiersten Kugeler, Centers for Disease Control and Prevention
- Board #105 **1332335**
Congruence between self-report and medical record CD4 lymphocyte and HIV viral load test results among HIV-infected patients in care *
Alison Hughes, San Francisco Department of Public Health

SUNDAY JUNE 3 2012  PRE-CONFERENCE



DISPLAY FROM

SUNDAY, JUNE 3 at 12pm thru TUESDAY, JUNE 5 at 4pm



POSTER AWARD FINALIST DISPLAY

(CenturyLink Center Omaha)

GRAND BALLROOM B & C

SURVEILLANCE / INFORMATICS

PRESENTATIONS ON MONDAY, JUNE 4 AT 10AM

- Board #106 **1319890**
Surveillance evaluation of the tri-county perinatal hepatitis B virus prevention program, Oregon, 2008-2011 *
Ashley Borin, Multnomah County Health Department
- Board #107 **1326763**
Trends in timeliness and completeness of reporting to the *Listeria* Initiative, 2004-2010 *
Katie Fullerton, Centers for Disease Control and Prevention
- Board #108 **1330593**
Evaluating the potential uses of hypothermia syndromic surveillance in New York City *
Kathryn Lane, New York City Department of Health and Mental Hygiene
- Board #109 **1331404**
From many to one: Development and evaluation of a unified patient match algorithm *
Angela Merges, New York City Department of Health and Mental Hygiene
- Board #110 **1332907**
Assessing the usefulness of the CHILD Profile Immunization Registry to obtain or verify vaccination history to enhance pertussis surveillance in Clark County, Washington *
Jennifer Merte, Clark County Public Health

SUNDAY  JUNE 3 2012

DISPLAY

SUNDAY, JUNE 3 at 12pm until 7pm



STUDENT POSTER PRESENTATIONS

(CenturyLink Center Omaha)

GRAND BALLROOM B & C

PRESENTATIONS ON SUNDAY, 5:30PM – 6PM

- Board #126 **1324850**
Timeliness of electronic laboratory reporting vs. traditional laboratory reporting in Southern Nevada from 1999-2010
Jennifer Lucas, University of Nevada
- Board #127 **1332194**
Local data systems: Finding gaps/opportunities for building community-linked health research infrastructure for South Omaha, Nebraska
Mahua Saha, University of Nebraska Medical Center
- Board #128 **1333208**
Closing public parks and its projected impact on health outcomes in St. Louis County, Missouri
Julie Gary, Saint Louis University
- Board #129 **1333228**
Modeling spatial accessibility to parks in St. Louis County, Missouri
Julie Gary, Saint Louis University
- Board #130 **1361005**
Increasing thyroid cancer incidence in the United States, 1973-2008: Time trends and age-period-cohort effects
Joanne Chang, University of Michigan
- Board #131 **1361911**
Using real-time technology to reduce the prevalence of HIV/AIDS among historically black college and university students, in Orangeburg, South Carolina
Patrick Nhigula, Walden University
- Board #132 **1364206**
Risk factors that may contribute to death from meningococcal disease: New York City, 2000-2010
Lola Arakaki, New York City Department of Health and Mental Hygiene

SUNDAY JUNE 3 2012  PRE-CONFERENCE

