

The National Center for Injury Prevention and Control (NCIPC) and National Center for Health Statistics (NCHS) Collaboration Updates

The Terms of Clearance in the National Violent Death Reporting System (NVDRS') OMB (Control No: 0920-0607) Package states the following:

“NCIPC’s NVDRS and SUDORS programs will continue to collaborate with NCHS’ NCVS to share knowledge and optimize investments associated with collecting data from state CMEs. The goal of this collaboration is to a) reduce duplicative reporting of the same data by States to different components of CDC; b) to improve the quality and timeliness of CME data to CDC (e.g., by increasing electronic interoperability of CME case management systems and public health reporting systems); and c) to maximize the value of the data being reported.”

In response to this requirement, below is a summary of activities that have occurred between NCIPC and NCHS from December 2017 to June 2018:

NVDRS has been part of a number of activities with the Implementers’ Workgroup led by NCHS. This group brings together a motivated group of Vital Registrars, coroners and medical examiners (C/ME) as well as Federal/State/Local/Tribal stakeholders to learn from each other, test new approaches to interoperability of systems, and demonstrate how standards-based technologies and techniques can be reused across the country to maximize benefit. This group hopes to adopt approaches that create value and reduce burden for data providers as well as data requestors (e.g., making C/ME and electronic death registration system [EDRS] systems more interconnected to support the secure flow of real-time mortality data).

December 2017

NCIPC/NVDRS staff (Janet Blair, Katherine Fowler, Allison Ertl, Emiko Petrosky) met with NCHS (Margy Warner, Paula Braun, Merianne Spencer, and Chuck Sirc) to discuss a newly funded project NCHS is developing to achieve real-time reporting on mortality data. Discussions were about how NCHS can make mortality-reporting activities more streamlined, part of a workflow, and more automated. Discussions also included the process of how NVDRS collects data from death certificates, coroner/medical examiner records, and law enforcement records, what specific data elements from records could be automated and which ones would still require manual abstraction. Next steps from this meeting are to determine how states participating in NVDRS automate data collection and other enhancements that will be needed to complement NVDRS current structure and ensure consistency across other data systems and agencies.

May 2018

NCHS’ Dr. Robert Anderson attended the 2018 NVDRS Reverse Site Visit in New Orleans, LA to give an update on Electronic Death Registration Systems to NVDRS states.

NCIPC/NVDRS staff (Shane Jack, Bridget Lyons, Emiko Petrosky) attended NCHS’ Medical Examiner, Coroner, and Vital Statistics Implementers' Workgroup Kickoff Meeting Proceedings for the PCOR-funded project “Modernizing the Infrastructure for Capturing Drug Death Data and Enhancing Research on Opioid Poisoning using Death Certificates’ Literal Text Fields”. One of the objectives of this project

was to promote standards-based interoperability between systems containing mortality information at the state level and improve the collection of drug information on death certificates. NCIPC staff were involved in discussions about Application Programming Interfaces (APIs) and Fast Healthcare Interoperability Resources (FHIR) that can help provide more specific up-to-date mortality data and support collaborative work across jurisdictions in a coordinated, secure and consistent way.

June 2018

NCIPC/NVDRS staff (Janet Blair and Kathleen McDavid Harrison) attended the National Association for Public Health Statistics and Information Systems (NAPHSIS) Annual Meeting in Miami, FL. NAPHSIS is the national nonprofit organization representing the state vital records and public health statistics offices in the United States. During the meeting, they attended a session hosted by the NCHS Implementers' Workgroup to discuss interoperability issues between coroners/medical examiners and vital statistics programs. The meeting provided an opportunity for dialogue and discussion about interoperability issues.

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In response to this requirement, below is a summary of activities that have occurred between NCIPC and NCHS from July 2018 through January 2020:

NVDRS has been part of a number of activities with the Implementers’ Workgroup led by NCHS. This group brings together a motivated group of Vital Registrars, coroners and medical examiners (C/ME) as well as Federal/State/Local/Tribal stakeholders to learn from each other, test new approaches to interoperability of systems, and demonstrate how standards-based technologies and techniques can be reused across the country to maximize benefit. This group hopes to adopt approaches that create value and reduce burden for data providers as well as data requestors (e.g., making C/ME and electronic death registration system [EDRS] systems more interconnected to support the secure flow of real-time mortality data).

September 2018

NVDRS (Janet Blair, Shane Davis Jack, Bridget Lyons) attended the NCHS Implementers’ Community meeting. Dr. Blair gave a presentation/overview of NVDRS. The presentation included an overview of NVDRS, information on how the data are collected, and what violent deaths are included in NVDRS. Additionally, it described the importance of NVDRS for providing states and communities with a clearer understanding of violent deaths to guide local decisions about efforts to prevent violence and track progress over time. The information gathered through NVDRS has helped to better understand risk factors for certain types of deaths, to help inform law enforcement about intimate partner violence, to identify hot spots, and to provide feedback to vital records, medical examiners and coroners, and law enforcement offices to help improve data quality.

February 2019

During the February 2019 Implementers’ Community meeting, a special interest in violent death reporting emerged, and an initial call was held to define mutual interests around enhanced reporting on suicides. This collaboration in which more specific and up-to-date information about suicides could be provided to state-level violent death reporting system programs, health researchers, and other interested parties such as veterans’ affairs in a more automated and secure manner.

During initial discussions, multiple perceived benefits were discussed:

- Reduce Abstractor Workload through More Automated Case Identification and Case Initiation
- Track Longitudinal Health History and Outcomes of Individuals while Preserving Patients’ Privacy
- Improve Data Completeness and Gather Additional Insights from Multiple Data Sources

- Gain Insights across Jurisdictional Boundaries: Information gaps may occur when an injury happens in one state, but treatment is provided and/or the death occurs in another state.

March 2019

Engaged in conversation with colleagues from NCHS as well as NCIPC's State Unintentional Drug Overdose Reporting System (SUDORS) regarding toxicology variables and how to increase the efficiency of data collection and minimize the burden that is placed on the CME systems. We are very interested in exploring ways to improve the way toxicology information is entered into NVDRS and SUDORS. Many CMEs receive individual pdf versions of toxicology results and there may be opportunities to automate this process (i.e., develop a batch import). We look forward to discussing this possibility with our SUDORS colleagues and NCHS.

May 2019

NCHS' Dr. Margaret Warner attended the 2019 NVDRS Reverse Site Visit in Denver, Colorado to give a presentation titled "National Center for Health Statistics (NCHS) Updates" which provided an update on Electronic Death Registration Systems to NVDRS states.

September 2019

In September 2019, NCIPC/NVDRS staff (Janet Blair, Craig Bryant, Bridget Lyons, Scott Van Heest) attended NCHS' Medical Examiner, Coroner, and Vital Statistics Implementers' Workgroup. One of the objectives of this project was to promote standards-based interoperability between systems containing mortality information at the state level and improve the collection of information on death certificates. NCIPC staff were involved in discussions about Application Programming Interfaces (APIs) and Fast Healthcare Interoperability Resources (FHIR) that can help provide more specific up-to-date mortality data and support collaborative work across jurisdictions in a coordinated, secure and consistent way. Mr. Bryant and Mr. Van Heest gave a description of the web-based system.

June 2019

NCIPC/NVDRS staff (Bridget Lyons) attended the National Association for Public Health Statistics and Information Systems (NAPHSIS) Annual Meeting in Columbus, OH. NAPHSIS is the national nonprofit organization representing the state vital records and public health statistics offices in the United States. During the meeting, she attended a session hosted by the NCHS Implementers' Workgroup to discuss interoperability issues between coroners/medical examiners and vital statistics programs. The meeting provided an opportunity for dialogue and discussion about interoperability issues.

December 2019

NCIPC/NVDRS staff participated in an NCIPC/NCHS quarterly meeting. These meetings have been initiated to improve communication, share updates on current and future mortality surveillance efforts and optimize resources. Attendees consist of staff from NCIPC (NVDRS, the State Unintentional Drug Overdose (SUDORS) program, the Opioid Response Coordinating Unit, and NCIPC's Office of Strategy and Innovation, and the Opioid Response Coordinating Unit.

January 2020

NVDRS staff (Surveillance Branch Chief Kathleen McDavid Harrison) attends The Department of Justice's (DOJ) Office of Justice Programs (OJP) and the Department of Health and Human Services (HHS) Medicolegal Death Investigation (MDI) Federal Interagency working group (MDI-WG) to coordinate Federal initiatives to strengthen the MDI system and support death investigation services practiced by medical examiner and coroner offices (ME/Cs) across the United States. The MDI-WG commenced in March 2018, is co-chaired by senior leadership from OJP and HHS and builds upon the work of prior Federal MDI working groups. NCHS colleagues serve on this workgroup. The MDI-WG's mission is to identify both short- and long-term goals to develop and implement programmatic activities that support the MDI system, that in turn, support Federal public safety and public health national initiatives and strategies. Activities may include: developing technologies/systems to facilitate information/data sharing between ME/C offices; toxicology laboratories; and Federal, State, and local entities, with specific focus on combating the opioid crisis; coordinating MDI research priorities. For more information, please see the link: <https://www.ojp.gov/resources/ojp-hhs-mdi-wg.htm>.