Federal Grant Application Request

Oregon Health Authority

Syndromic Surveillance Grant

Analyst: Linda Ames

Request: Approve the submission of a federal grant application to the Centers for Disease Control and Prevention in the amount of up to \$400,000 per year for four years to enhance syndromic surveillance.

Recommendation: Approve the request.

Analysis: The Oregon Health Authority (OHA) is requesting approval to apply for the National Syndromic Surveillance Program: Enhancing Syndromic Surveillance grant from the Centers for Disease Control and Prevention. The grant is for up to \$400,000 per year for four years, and begins September 1, 2015.

Syndromic surveillance is the collection and analysis of near "real time" health data, primarily from emergency departments, used to detect unusual activity for further public health investigation or response. This is useful for events such as influenza season, disease outbreaks, wildfires, and large gatherings. Oregon's system, called Oregon ESSENCE, was adopted in 2010 and includes daily automated data transfer from 99% of statewide emergency department visits.

The grant would be used to develop regional training and conduct exercises that would include local health departments in Oregon, all Oregon hospitals and health systems that provide emergency department care, and the Washington Department of Health. Funds would also be used to improve data quality. Finally, the grant would be used to enable Oregon to participate in the national syndromic surveillance system. Public Health coordinates their activities with the Office of Health Information Technology within OHA.

No state matching funds are required for the grant, and there is no federal requirement for maintenance of effort. The agency expects to need two new limited duration positions for training, data analysis, system development, and data quality.

The Legislative Fiscal Office recommends approval of the request to apply for a grant to the Centers for Disease Control and Prevention in the amount of up to \$400,000 per year for four years to enhance syndromic surveillance.