



**No. 04-11**

## **STATEMENT OF POLICY**

### **LOCAL HEALTH DEPARTMENT EPIDEMIOLOGY AND SURVEILLANCE CAPACITIES**

#### **Policy**

The National Association of County and City Health Officials (NACCHO) supports the development of local health department (LHD) epidemiology and surveillance capacities to promote evidence-based public health practice. Epidemiology and surveillance capacities include having, or having access to, sufficient personnel and systems to: 1) recognize promptly and respond effectively to disease outbreaks and other public health issues; 2) monitor and analyze the incidence and prevalence of diseases of public health significance; 3) provide LHDs, and others with a need to know, with accurate and timely data to ensure sufficient resource allocation to areas of greatest need; and 4) evaluate the effectiveness of interventions.

NACCHO strongly supports the development of integrated surveillance systems and data collection mechanisms that allow for analysis and dissemination of accurate local data, including but not limited to census tract, zip code, county, city, and region. In addition, NACCHO urges that local- and state-reported data in such systems be equally accessible to local, state, and federal jurisdictions. Data files should reside in electronic form at the LHD whenever local capacity permits and be designed to permit analysis of data elements by local staff to address local circumstances.

#### **Justification**

Because state and national data often do not identify potential health needs or trends of localities, each LHD must have the capacity to collect and analyze local data to monitor and improve the health of its community.

Epidemiology and surveillance capacities are essential to assuring the three core functions of public health at the local level: assessment, policy development, and assurance. The strategic assignment of epidemiology professionals to provide technical assistance and support to LHDs and the provision of epidemiologic training to LHD staff will enable the setting of appropriate population-based health metrics, ongoing improvement of public health response protocols and interventions, and improvement of community health outcomes.

Finally, national and state datasets often do not have specific local data, which limits their usefulness to LHDs. Data that can be disaggregated by census tract, zip code, county, city, and/or

region are integral to developing and implementing data-driven public health programs, interventions, and priorities.<sup>1</sup>

**Record of Action**

*Adopted by NACCHO Board of Directors, November 7, 2004*

*Revision adopted by NACCHO Board of Directors, July 11, 2007*

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<sup>1</sup> Luck J., Chang C, Brown EC and John Lumpkin J. Using local health information to promote public health: issues, barriers, and proposed solutions to improve information flow. Health Affairs. 2006;25:975-991.