

Partnerships in Service of Effective Data Sharing

Faculty: Kirsten Larson, MPH
 Manager, Food Safety
 Association of Public Health Laboratories (APHL)

Kelly Wroblewski, MPH, MT(ASCP)
 Director, Infectious Disease Programs
 Association of Public Health Laboratories (APHL)

Brief Summary of Case Study:

The fifth and final session of this year's *Building Bridges* series, Partnerships in Service of Effective Data Sharing, the Association of Public Health Laboratories (APHL) Manager of Food Safety, Ms. Kirsten Larson, MPH, presented a case study (*Listeria Infections Linked to Soft Cheeses*) to demonstrate the importance of clinical laboratory isolate submission to public health laboratories (PHLs) for whole genome sequencing (WGS) as part of the PulseNet system. Ms. Kelly Wroblewski, MPH, MT(ASCP), APHL Director of the Infectious Diseases Program, presented an overview of how partners share critical and timely data to support the influenza surveillance system.

Lessons Learned/Best Practices Applied by Faculty:

In order to conduct effective data sharing in service of public health, it is critical to:

1. Recognize that surveillance of pathogens relies on strong clinical and public health laboratory partnerships. *Effective surveillance of endemic and emerging pathogens (e.g. Influenza surveillance through the [National Respiratory and Enteric Virus Surveillance System](#)) and food-borne, waterborne, and OneHealth-related illnesses (through [PulseNet](#)) requires coordination and collaboration between clinical laboratories (sentinels) that submit specimens and foodborne illness isolates to public health laboratories. Although the nature of this process and engagement rates may vary both state-by-state and by pathogen/disease case, it is clear that these collaborations are critical to maintaining robust public health emergency responses and surveillance systems.*
2. Consider ways to incentivize stronger engagement of clinical laboratories (sentinel laboratories) in public health monitoring and surveillance (via submission of isolates). *Providing site-specific data reports, certificates, and continuing education opportunities are good incentives to encourage participation of sentinel (clinical) laboratories. Clinical laboratories are further encouraged to share processes that would make it easier for them to participate in surveillance and monitoring processes with their state or public health laboratory. Having a site-specific Champion at the clinical laboratory who is able to advocate for strong collaboration with public health laboratories may be an effective way to enable informed and consistent communication and buy-in from leadership.*
3. Engage topical partners (on a case-by-case basis) to collect the most complete surveillance data and contribute to effective prevention of disease transmission. *Effective data sharing in service of (foodborne) disease outbreak and response requires collaboration across disciplines (laboratory, environmental, epidemiology, regulatory programs, industry, PIO), levels of government (federal, state, local), and within lab systems (clinic, reference, public health, human and animal food labs, etc.).*

*In the case of Influenza surveillance, conducting outreach and education to animal exhibitors (specifically for swine, cattle, and avian species) at or attending agricultural fairs is critical. In the case of a foodborne illness (e.g. *Listeria Infections Linked to Soft Cheeses*), partnerships may need to include other national partners like the FDA to conduct inspections and sampling, local retail establishments/distributors, etc. In both cases, where relevant, a OneHealth-focused approach should be considered in order to integrate environmental, animal, and human contributions and disease impact.*

Visit our [hub site](#) to find additional resources for this Building Bridges Across the Laboratory session!

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