



# SC Revenue and Fiscal Affairs

SC Integrated Data System:  
Supporting the COVID-19  
Response

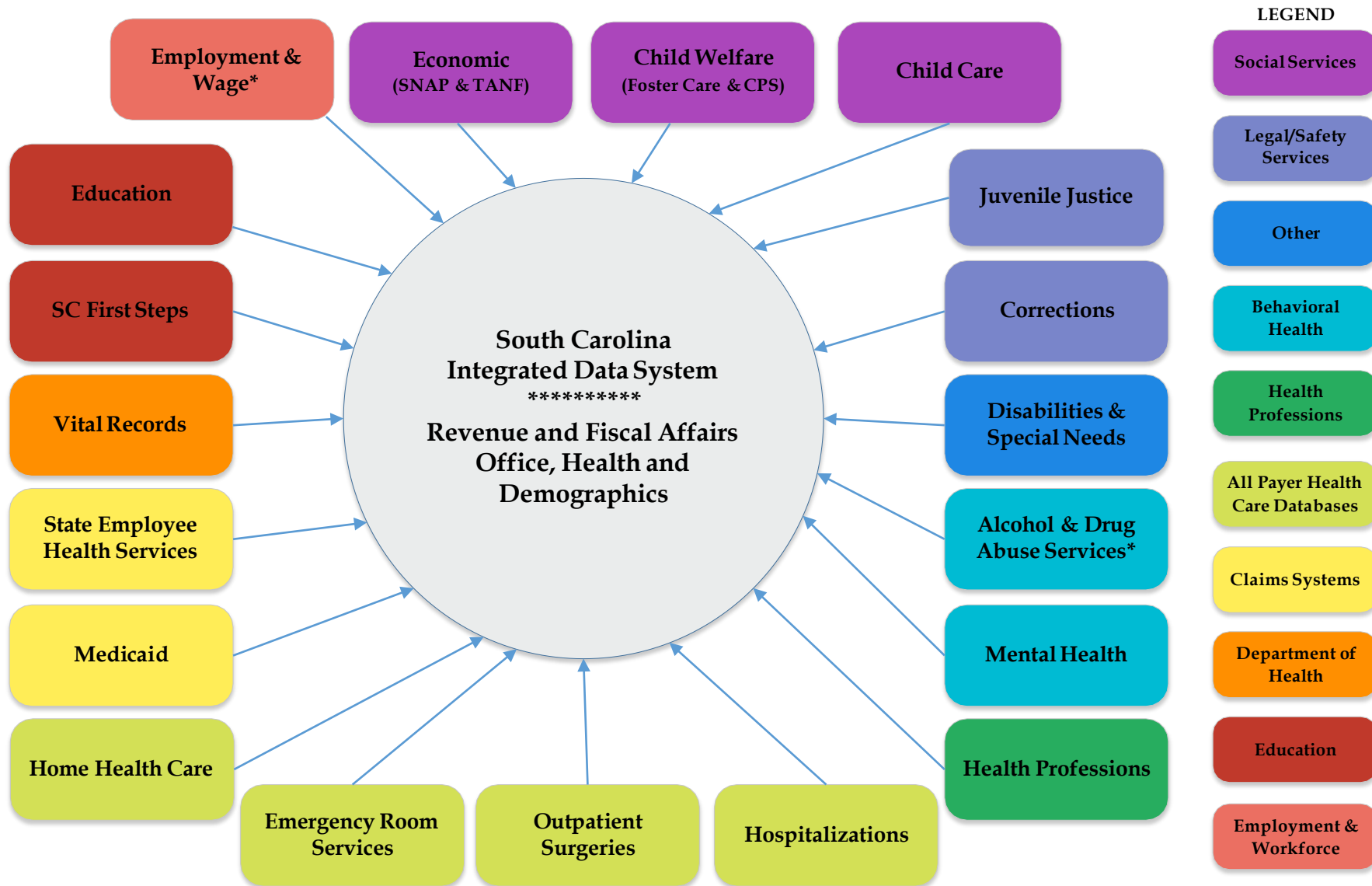
Active Intelligence for Social Policy  
Philadelphia, PA  
June 22, 2022



# Who are we?

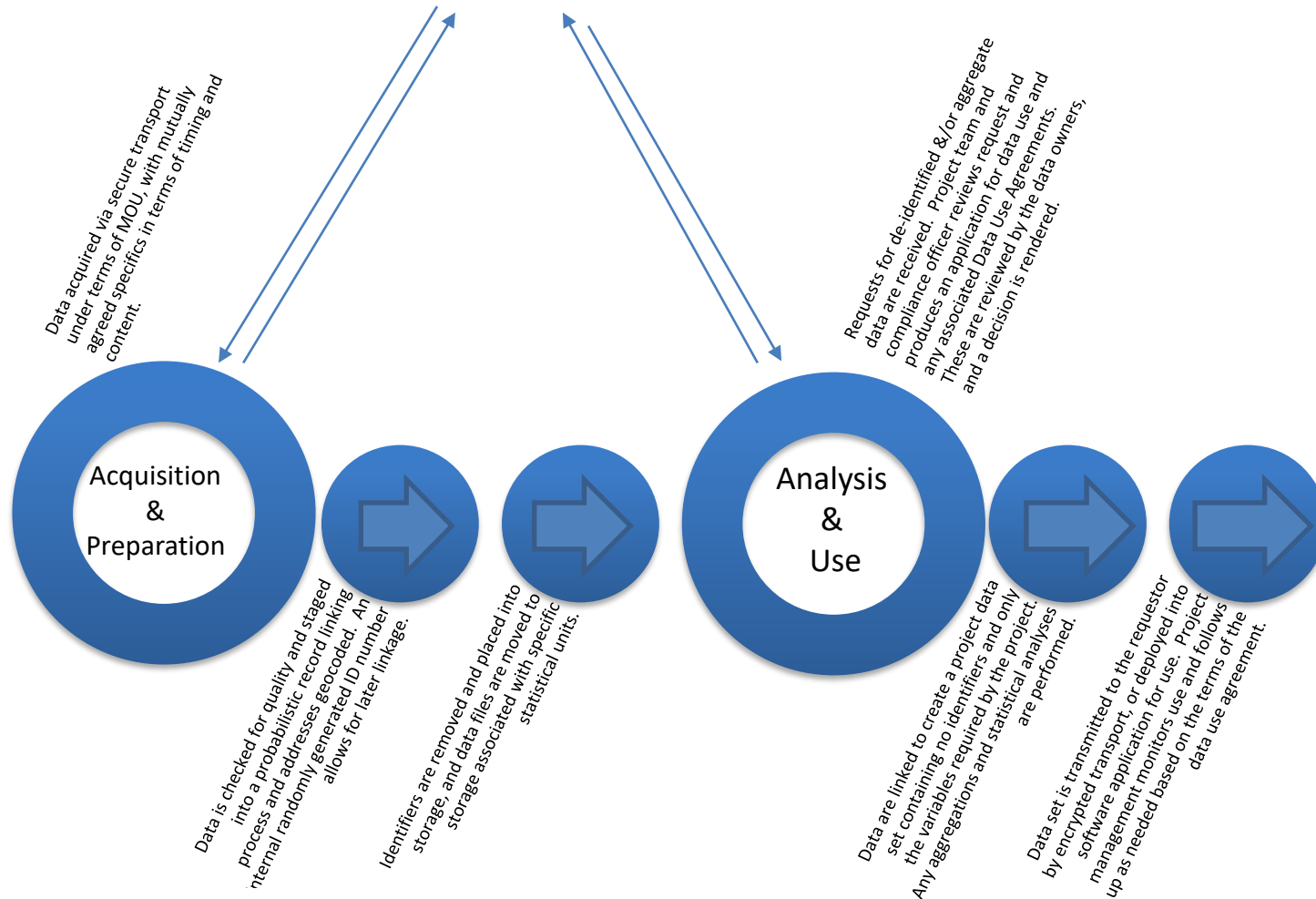
- **Agency Mission:** To provide independent research, analysis, and resources to facilitate informed policy decisions and administration of services
- **Division Vision:** “It is the entire human experience that influences health and social well-being and should therefore be captured and analyzed through an integrated data system.”
- **Staff:** 31 employees, 1/2 statisticians trained in either theoretical statistics or their substantive disciplines. The remaining staff are focused on supporting information/knowledge deployment skills such as software development, geo-spatial analysis and data base administration, as well as project management, and compliance.





# Process Overview

## Data Owners and External Governance



# Information Products

## Analytic Products

- Agency Collaboration
- Researcher Collaboration
  - Data linkage
  - De-identified datasets
  - GIS support
  - Analytic support
- Public Website ([www.rfa.sc.gov](http://www.rfa.sc.gov))
  - Descriptive statistics
  - Ability to query data sources and generate ad-hoc report
  - On-line analytics

## Application Partners

- ABC Tablet Application
- Community Long Term Care Application (Phoenix)
- Ages and Stages Questionnaire
- Dept. of Education Data Warehouse
- Purpose Built Screening and Referral Systems
- South Carolina Health Information Exchange (SCHIEx)
- Educational Credit for Exceptional Needs Children (ECENC) program





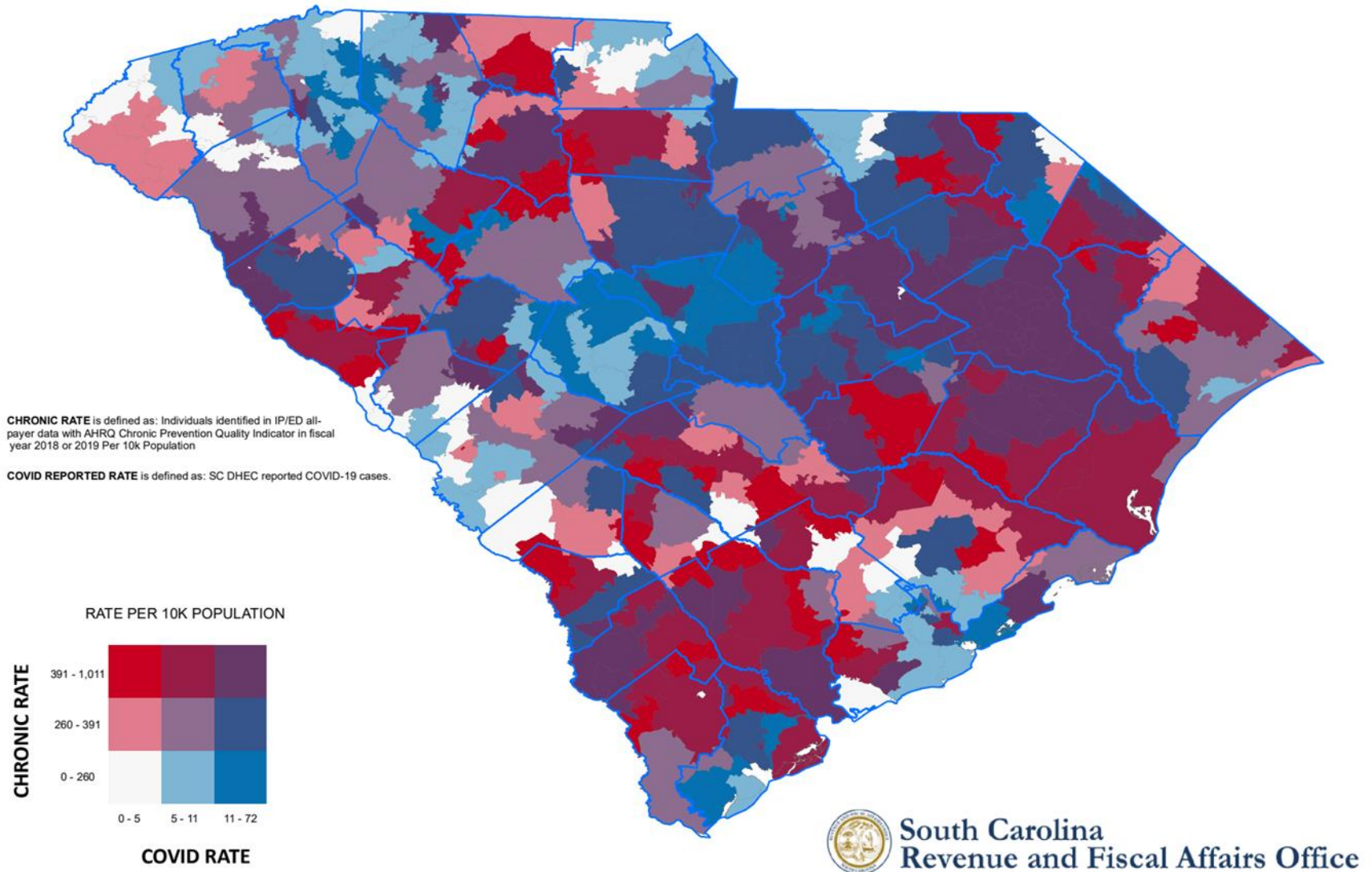
# Health and Demographics

## COVID-19 Analyses and Health Equity





# AHRQ Chronic Prevention Quality Indicator Rate vs SC DHEC COVID RATE by Zip Codes Per 10k Population



# Big Data Driven Clinical Informatics & Surveillance (BDDCIS) for COVID19

NIH Grant # R01AI127203-4S1

- Partners: U of SC Big Data for Health Sciences Center, DHEC, RFA
- Innovations:
  - Breadth and variety of data sources (DHEC, Hospital (UB 92/04), Medicaid, DMH, DAODAS + others pending approval or submission)
  - Advanced techniques such as machine learning and predictive modeling
- RFA role:
  - Data intermediary and data supplier
  - Person level record linkage





# Big Data Driven Clinical Informatics & Surveillance for COVID-19

- Aim 1: Create a de-identified linked database system for collating surveillance, clinical, multi-omics and geospatial data on both COVID-19 patients and health workers (HW) treating COVID-19 patients in South Carolina.
- Aim 2: Examine the natural history of COVID-19 including transmission dynamics, disease progression, and geospatial visualization.
- Aim 3: Identify important predictors of short- and long-term clinical outcomes of COVID-19 patients in South Carolina using machine learning algorithms.



# Overview

- Statewide data from laboratory-confirmed COVID-19
- Feb 10, 2020–Jan 05, 2021
- Standardized CDC Case Report Form (CRF)
- Exploratory Analyses

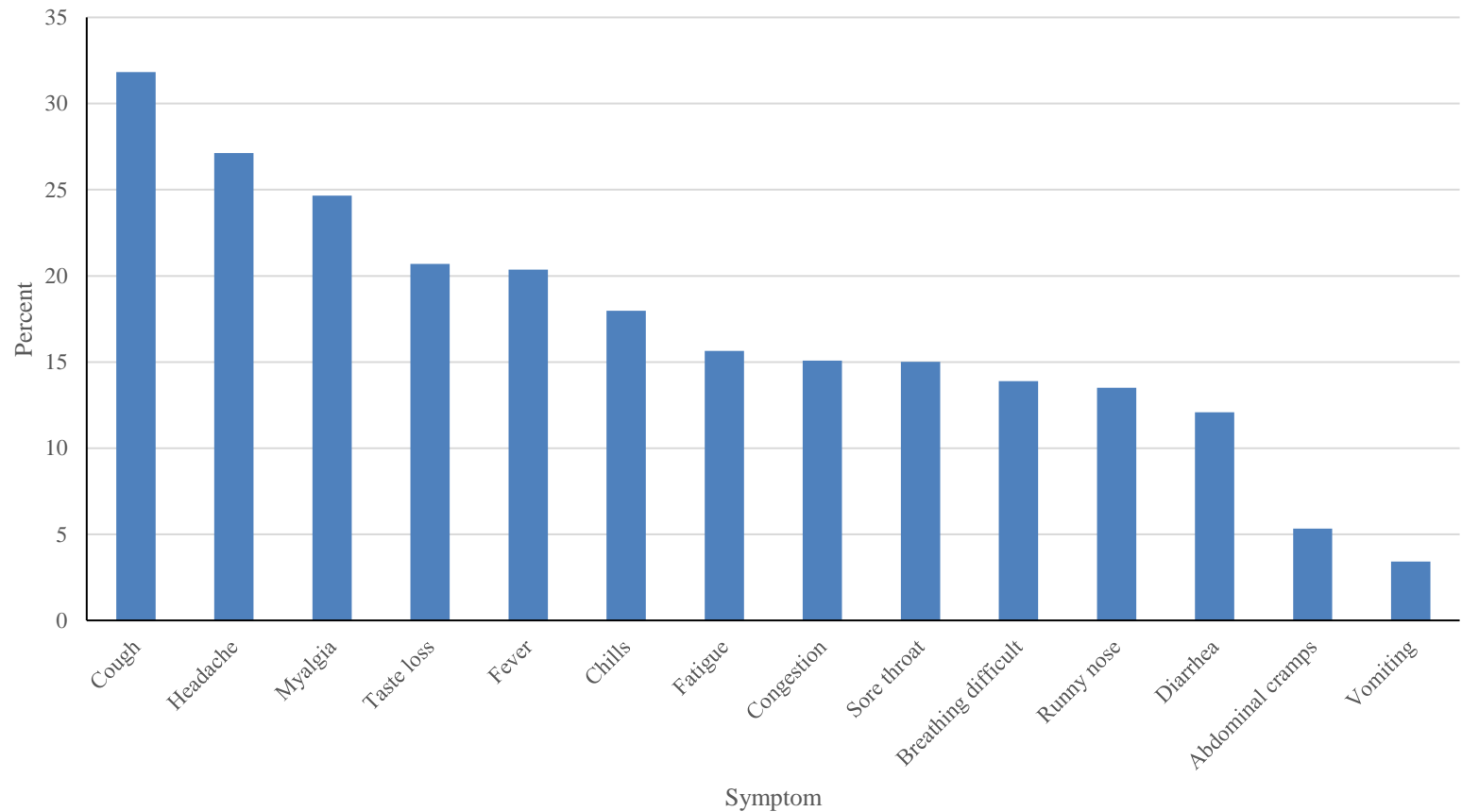


# Result Highlights

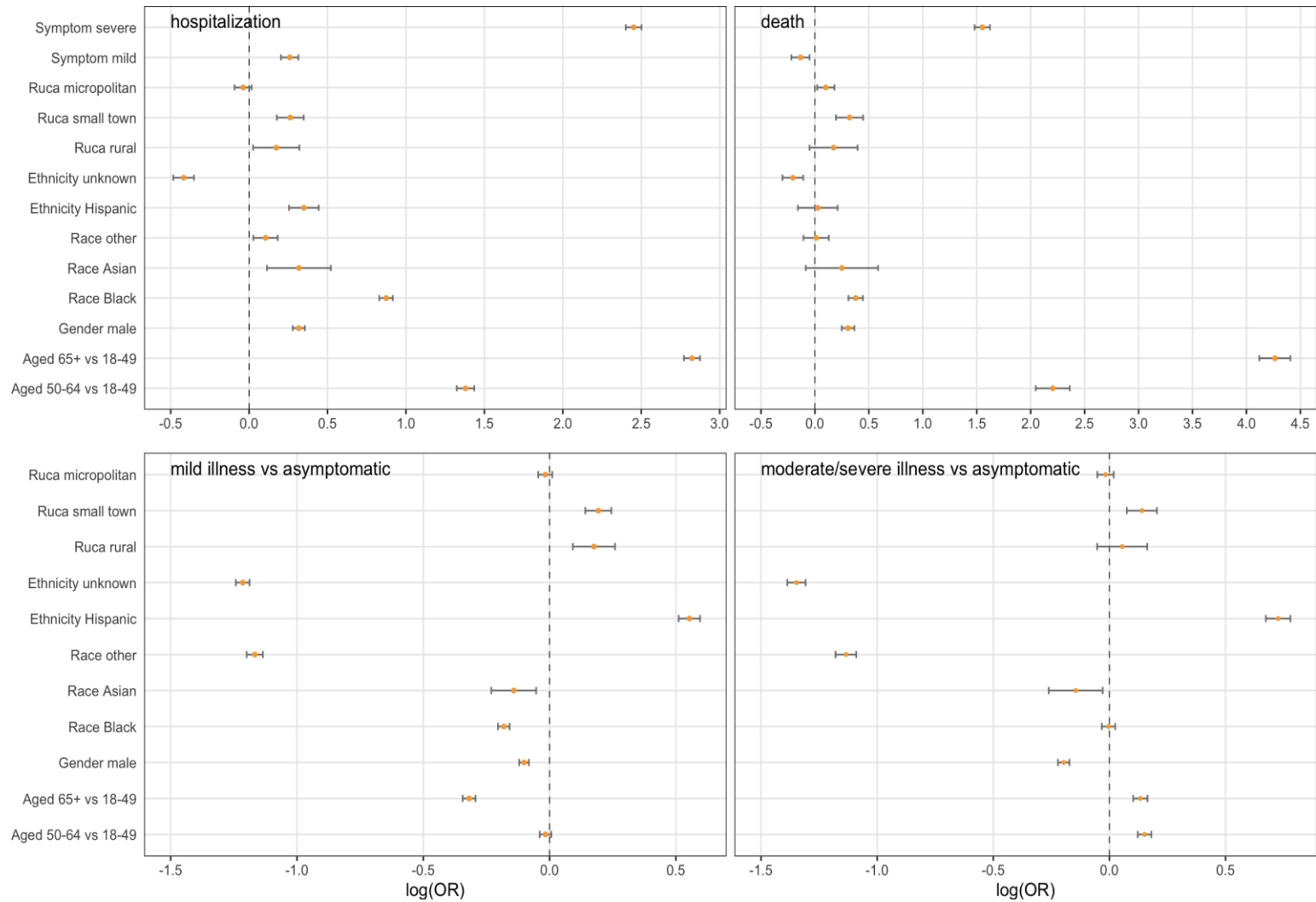
- 280,177 SC COVID-19
- Around 5.2% (14,451) were hospitalized
- 1.9% (5,308) died.
- Presenting symptoms: such as cough (31.8%), headache (27.1%), fever (20.4%), myalgia (24.7%), and loss of taste or smell (20.7%) most dominant symptoms
- Older patients, males, African Americans, Asians, rural residents had higher odds of hospitalization and/or mortality.



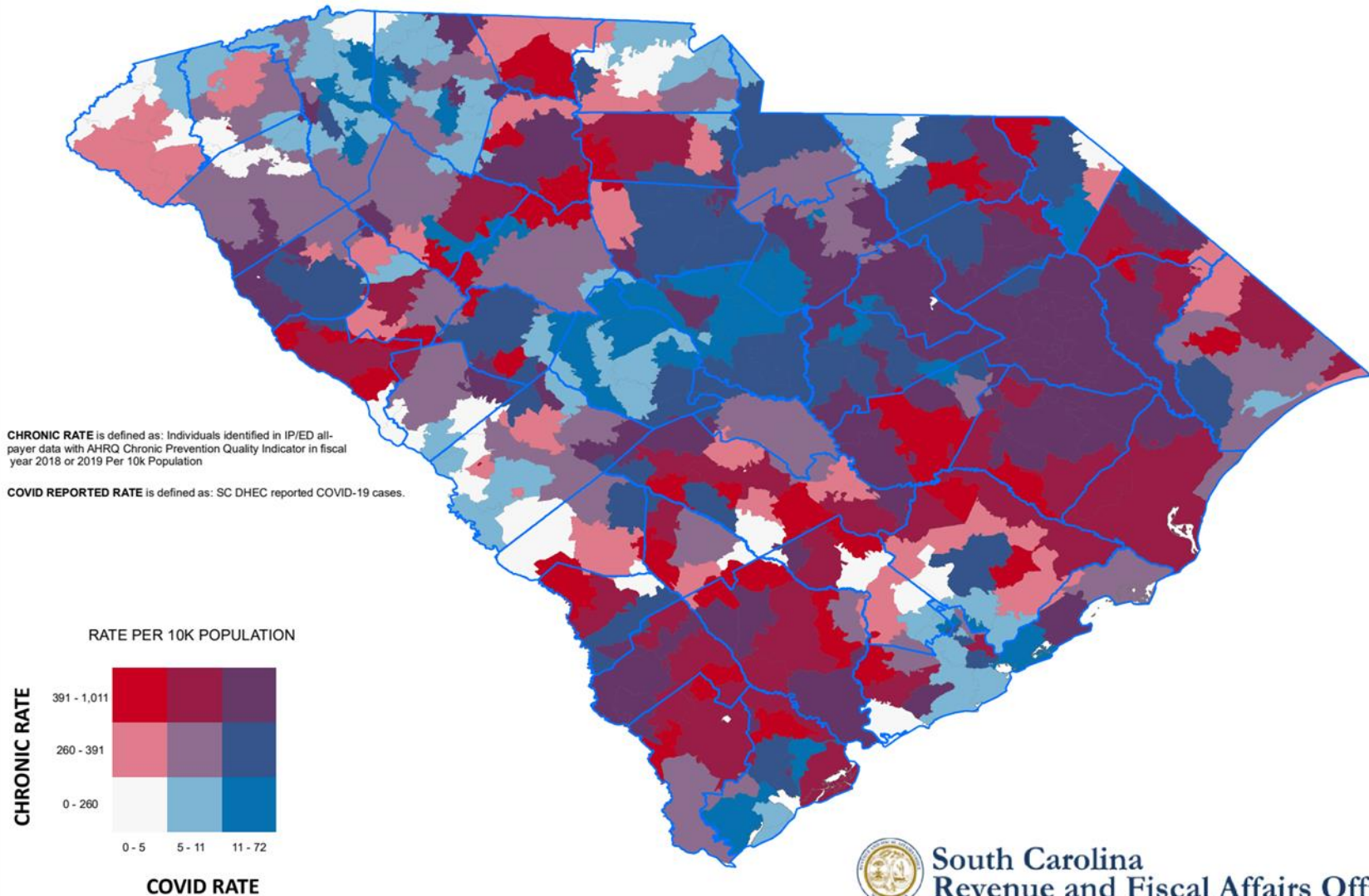
## Distribution of Symptoms for SC COVID-19 Patients, Hospitalization and Mortality, SC COVID-19 Patients, Feb 2020 – Jan 2021



# Odds for Multiple Indicators, SC COVID-19



# AHRQ Chronic Prevention Quality Indicator Rate vs SC DHEC COVID RATE by Zip Codes Per 10k Population





# For further information

W. David Patterson, Ph.D.  
Division Director, Health and  
Demographics

[David.Patterson@rfa.sc.gov](mailto:David.Patterson@rfa.sc.gov)

803-898-9954

