

Monitor Health Status

May 9, 2007

**New Hampshire Division of Public Health
Performance Improvement Workplan**

Broad Aim of the Project or Performance Measure:

To develop a user-driven flexible system (web/system wide) that can be used to access relevant public health data

Baseline: Components of this exist

1. Plan - the Change Based on problem identification, analysis and root causes	2. Do – Try the Change on a Small Scale Action Steps - What, Where, How?	Who? Partners who will carry out the action or change	When? Target completion date	Study-Observe/Eval the Results of Change
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<p>Problem statement defined:</p> <p>Relevant data and statistics to prioritize public health problems and evaluate interventions are not available to state and local stakeholders</p> <p>Performance measure(s) with baseline data:</p>	<p>To develop a user-driven flexible system (web/system wide) that can be used to access relevant public health data</p> <p>Information gathering</p> <p>1) Create a context or framework for selecting key public health indicators to be <i>readily available at the state and local level</i> for decision making and program evaluation</p> <p>Look at 2010</p> <p>WRQS</p> <p>BRFSS</p> <p>Citizens Health Initiative</p>	<p>Academic Institutions</p> <p>Citizens Health Initiative</p> <p>Community Health institute</p> <p>DHHS</p> <p>NHPHA</p> <p>Hospital Association</p>	<p>Partially complete and ongoing via systems development of HealthWRQS (introduction of Cognos 8)</p>	<p>We are adopting the Citizens Health Initiative POUND of Prevention Public “Health Challenges” as our framework, extending the framework to include demographic, employment, law enforcement data, and spatial data.</p> <p>Focus will be on intervention effectiveness/outcome impact.</p> <p>Could also tie to Hospital Community Benefits program (community health profile assessments)</p>
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	<p>2) Identify existing data in the state and update data inventory</p> <p>WRQS</p> <p>Community Health Centers</p> <p>UNH Data Inventory</p> <p>What spatial data is available? (GIS, Disease Mapping...)</p>	<p>Academic Institutions</p> <p>CHAN/EMR Users Group</p> <p>Bi-State</p> <p>DHHS</p> <p>State Regionalization process as a way to ID populations</p>		<p>Identify data sources for pound of prevention indicators</p> <p>Update a review on what other states have done to make data accessible to users</p> <p>Survey to various data sources (create data matrix) – include hospital and patient private EMR</p> <p>Include data sources that are tabular but can be linked to spatial data, e.g. lots of census data, data reported out by town by DES, etc.</p> <p>(Note: population based vs patient based/other</p>
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				individual? Link to health system?)
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	<p>3) Determine a way to generate immediate reports and opportunities to improve access to data posted on a web site</p> <p>Determine DHHS needs and if they can meet the needs</p> <p>Determine who has the capacity</p> <p>Determine partners who have capacity and can link to appropriate resources</p> <p>Increase the capacity of DHHS web team</p> <p>Issue Briefs</p> <p>Instant Atlas maps</p> <p>GRANIT GIS products</p> <p>Regional Health Profiles</p> <p>CDC Assessment Initiative (UNH-DHHS) – enhancing (NH HealthWRQS)</p> <p>White papers on important data issues (collection, sharing, etc)</p>	<p>NHPHA</p> <p>Citizens Health Initiative</p> <p>DHHS</p> <p>Other States</p> <p>Academic institutions</p> <p>Potential Funders</p> <p>Endowment for Health</p> <p>NH Charitable Foundation</p> <p>Insurers</p> <p>CDC</p> <p>Private/National Organizations</p> <p>(NLM) National Library of Medicine Informatics grant</p>	<p>Partially completed</p>	<p>Talk to PHIAP communications group to share website for uploading capability.</p> <p>Explore Business Intelligence software (real-time/dashboards) Like Cognos/WRQS for custom querying</p> <p>Also investigate open source web products (Apex freeware querying tool)</p> <p>Work with the GRANIT (State GIS clearinghouse) and our on-line mapping capabilities</p> <p>Look at other state models/partnerships for this</p>
NH DHHS, Division of Public Health Services NH Public Health Performance Improvement Workplan December 2006				<p>New technology (cell phone surveys)</p>

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:	<p>Development and Implementation Phases</p> <p>1) Create a data center in the Division of Public Health with defined requirements</p> <ul style="list-style-type: none"> ▪ Define the data center, Develop a description – ▪ Identify existing resources: staffing, epi capacity, funding stream/restrictions and infrastructure. List current “services” and limitations of existing mechanisms for analyzing and reporting data. Identify next level of service or technical assistance/expertise. <p>Seek legislative support for a DPHS data center – including staff</p>	<p>CHI Legislators NHPHA NHPHN Citizens Health Initiative Academic Institutions</p>	<p>Ongoing – Concept Paper Written and presented to the Advisory Council</p>	<p>Who would authorize data center initiatives? (PHIA advisory council)?</p> <p>Write up a business plan/proposal for data center functions</p> <p>Develop a mission for the data center</p> <p>Focus on Pound of Prevention challenges; start with data center step 1 (concept paper), Step 2 Staff Training, Step 3 partnership development, Step 4 Building data infrastructure focused on Pound of Prevention possible</p> <p>Possible linkage to GRANIT for data publishing services, offering mapping content so that users of public health data</p>
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	Investigate new sources of data and application for public health surveillance			DPHS analysts learn to use data overlay in new software for small area analysis.
	3) Create a state health profile biennially or as determined by the data advisory committee: <ul style="list-style-type: none"> ▪ Consider appendices at sub-state level ▪ Consider requiring production of the report on a regular basis 	DHHS Citizens Health Initiative Academic Institutions	End of 2009	There are currently two reports published – the DHHS State Health Report and the CHI Pound of Prevention. Instead of publishing these reports annually, we will focus on Pound of Prevention challenges, either simply supply the data to our partners or we will produce some reports on our own. More data will be disseminated according to #3 above.

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	4) Review and refine existing data resources to meet current and changing needs (January 2008) <ul style="list-style-type: none"> ▪ Expand BRFSS and YRBS – to allow for sub-state analysis to have accurate data about health risk behaviors in NH ▪ Promote universal implementation of YRBS Data advisory committee provides input into BRFSS and YRBS for continuity ▪ Expand to include items relative to key data indicators as in information gathering ▪ Explore data linking opportunities 	DHHS Data Committee Potential Funders Endowment for Health NH Charitable Foundation Academic Institutions	2009-2010	This is more Data Center Phase 2 step)
	5) Develop capacity to exchange data with			

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	<p>systems partners via web</p> <p>Review results of pilot programs such as RWJ grant to collect performance measures\RTI?Hie/e-prescribing</p> <p>Review progress of DPHS Environmental Health Tracking Program's transfer of data between DES and DHHS.</p> <p>Establish a dedicated DPHS server to allow automated data exchanges via PHIN MS software for PH Labs, EPHT, and related programs.</p>	<p>DHHS UNH CHAN Primary Care Health Centers GRANIT NH DES NH OIT NH Dept of Safety</p>	<p>2009-2010</p>	<p>This is more Data Center Phase 3</p>
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