

HIEPI Meaningful Use Public Health Workgroup Meeting

Meeting Owners	David Laflamme
Minutes Author	Joanie Foss
Version	1

Date	July 13, 2010
Time	10:00-12:00
Location	Rm 311 29 Hazen Drive

AGENDA

Topic	Led By	Start	End
Determine Process to Make Recommendations	David Laflamme	10:00	12:00

ATTENDEES

Name	In Attendance (Y or N)	Name	In Attendance (Y or N)
David Swenson	Y	Marcy Doyle	Y
Niki Watson	Y	Michael Lavoilette	Y
Bobbie Bagley	Y	Elizabeth Traore	Y
Dotty Bazos	Y	Ashely Conley	Y
Sai Cherala	Y	Brooke Dupee	Y
Lisa Bujno	Y	Marcella Bobinsky	Y
Eric Turner	Y		

GUESTS

Name	In Attendance (Y or N)
Mark Belanger	Y
Sharon Alroy-Preis	*

* Via telephone

MEETING HANDOUTS

1. See NH HIEPI Google site for all documents. <http://sites.google.com/site/nhhiepi/>

MEETING SUMMARY

Introductions were made all around.

David asked workgroup members if the Google site is working for everyone, then explained how to sign up for "auto-notification".

There are four new documents on the website pertaining to feedback from the last meeting. Marcella went on to explain her "Stream of Consciousness" document recently posted. She explained how the first goal will be to get existing systems to communicate with each other (interoperable). She stated that to get the 28 "nodes" talking to each other would require funding and time before we can start receiving info into the public health node. What are they reporting now and in what mode? Can we ask them to get information to us electronically? What do we want to ask them to push towards us now? Are we ready to become a public health system?

When collecting aggregate data it needs to be de-identified by our systems – constructively identify and be careful about what information is requested/needed. Use the minimum necessary.

The three components to evaluate potential requests for identifiers might be: 1) security; 2) goal or objective; 3) economic savings/public health need.

Dotty stated that we need to build systems using SAU's, immunizations, health departments indicators – aggregate at public levels – build in to collect data. Example: Immunizations are often (but not exclusively) provided at the SAU level. Capturing this information would be useful.

David –Could some percentage of estimated economic savings be used for future maintenance and improvement of the system? Sustainability.

David – Draft Framework – Process to Form List

- o Summary – recommendation in specific format
- o Indicator Recommendation – frame around health issues vs. measure not clinical process
- o Rationale & Justification – why that health issue? Is it a cross cutting health issue?
- o Link measures to evidence based public health solutions/interventions
- o Proportion of population impacted/severity
- o Measure – specify list of indicators published – define the measure/data points to support
- o Health Impact
- o Economic Impact – what are we spending now?
- o Privacy – important
- o Identify evidence-based solutions
- o Solutions/Examples
- o References – for each recommendation

Comments:

Dotty – referenced “Perfect Care” Article – will send PDF

Lisa – Health issue/rationale, measure section – quality of measure

Marcy- redundancy of measure – don’t recreate the wheel

Sharon – Look at death certificate data – see what people are dying of

Lisa – Personal health care/public health (boundaries)– this needs to be part of the process

Sai – Death certificates often time do not have accurate information

Dave S. – Health Stats does track cause of death and has a list of highest causes of death.

Brook – turn draft framework/matrix to landscape – add clinical indicators that are coming out, take out privacy and examples, leave space blank if there is no current economic impact.

Dave S. – Choose indicators (qualifier) – give capacity/infrastructure for the system to be built/a system that is going to handle all our needs.

(Add to framework) – Primary, Secondary, Tertiary Prevention

Draft framework – applying to indicators- process of picking indicators, health departments to work together to pick one or two indicators each for a total of four

Lisa will take a broad view to see if our recommendations cover the life course.

The need to address quality of life and not just death as an outcome was reiterated/discussed.

Brook – Using the list of Medicaid Indicators/List of Quality Indicators/David’s Matrix to come up with the short list (final ten indicators).

Need to figure out good data vs. bad data i.e. death cert., claims data may not be good enough, a measure/validation system is needed. The clinical record based data we have been discussing will not provide population-based statistics until out-of-state data for NH residents is included.

David – Process for coming up with short list – 10 indicators (health issues) with no more than 3 sub-indicators

Mike and Sai – cancer, asthma

Marcelle – immunization

David - MCH

Lida – heart health

Dave S. – flu

Eric – rural health

Marcy/Nike – will check website for uncovered issues

Dave S. – will post on Google the list of “Causes of Death Report”.

Lisa – Behavioral issues – take issue and frame it around the indicator.

Action Items were reviewed by the group

- o Look at list of existing indicators on website – Table 3 – (an updated list will be posted to the website)
 - o Look at indicators pertinent to the area
 - o Lisa to look at all to make sure the top ten are covered
 - o Lisa to meet with Sai and Dotty
- o Pick short list of health issues with up to 3 indicators
- o David to create spreadsheet with health issues/indicators

Mark Belanger (Technical Writer) Phase 1 – Functionality is very basic – basic “pipe” that can push data and collect current available data
 Phase 2 – Post legislation change – will be able to get data from other stakeholders – labs, physician data, tapping referrals etc.

Next meeting
 Teleconference – 7/20 - 3:00-4:00

ACTION ITEMS (FROM PREVIOUS MEETINGS AND NEW)

Item #	Raised By	Action Item Description / Comment	Assigned To	Due Date	Status/ Remarks
1	All	Create and distribute/upload spreadsheet of framework for selecting indicators	David L. & David S.	7/13/10	Done
2	All	Select indicators using framework	See assignments on p.2 of this summary	7/20+	Ongoing

ISSUES IDENTIFIED

Issue #	Raised By	Issue Description	Assigned To	Due Date	Status/Remarks
1					

DECISIONS MADE

Decision #	Sponsor	Decision Description	Approved (Y or N)	Comments
1				