

**FINAL AGENDA and DISCUSSION POINTS**

**NATIONAL COMMITTEE ON VITAL AND HEALTH STATISTICS  
Executive Subcommittee Strategy Session  
Marriot Washington Hotel  
1221 22<sup>nd</sup> Street, NW  
Washington, D.C.  
(202) 872-1500**

**November 30, 2010**

- 9:00 a.m. Call to Order  
Review agenda and plans for the session
- 9:15 a.m. Securing Input in Targeted Areas Jim Scanlon, HHS (20 Min)  
Dr. Charles Friedman and  
Dr. Claudia Grossmann on  
IOM Report (30 Min)
- 11:10 a.m. Break
- 11:35 a.m. NCVHS, Next Two Years

Maintaining Focus and Direction, and Review Operations Subcommittee

**Required assignments:**

Standards mandates from ACA and HIPAA

**Potential focus**

Secondary uses of data?

HHS Community Data Initiative has opened a new world with a partnership between web innovators and government data.

In less than a year transformative uses have emerged that empower and educate individuals on health and healthcare, as well as inform policy makers by juxtaposing data about health/illness in relation to community resources.

Currently the data is from HHS.gov. Could this eventually include EHR data that has been aggregated or anonymized? (As has been discussed in IOM panel on Rapid Learning Health System)

**Question for the Committee**

Does it make sense for us to focus on this future state and the implications (beyond HIPAA!) for quality, standards, privacy and population health?

This builds on the **Quality** Health Measures Road Map, but potentially takes it to a broader patient centered model using I-phone apps and having patients direct where the data goes.

This builds on the **Populations** proposals on the topics below, but changes the perspective from what *could* be done to what *is being* done.

Linkages of data: EHR, administrative, mortality, surveys

Linkages to data about influences on health-- environment exposures, housing education, socioeconomic status etc

Health indicators dashboard to monitor health reform

This opens up new horizons for **Standards** and compelling issues for **Privacy** and Stewardship.

This ties in with IOM Rapid Learning Health System -- creating infrastructure that makes secondary use routine, supported and facile.

Given that this revolution has occurred through data.gov, it stands to reason that this emerging data falls within the NCVHS charter to advise the Secretary "on health data, statistics, privacy, national health information policy, and the Department's strategy to best address those issues."

12:15 p.m.	Lunch	
1:25 p.m.	<u>NCVHS Configuration and Committee Process</u>	Chair
	Once direction is decided upon, how do we configure ourselves? Does the current subcommittee structure make sense? 4 subcommittees? 2 co-chairs?	
	Committee Process -- Summary of proposed process changes. Preview of topics for full committee before letter comes forward	
	<u>Maintaining impact</u> – Assuring relevance in the field; Interface with other HHS Committees-- beyond HHS?	
3:30 p.m.	Next Steps and Wrap up	Chair
4:00 p.m.	Adjourn	Chair

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### Background “Assignments” in preparation for Strategy Session

1. Video ~2hrs of the June 2010 kickoff of the Community Data Initiative. Five programs are highlighted that demonstrate the power of linking the data from data.gov with the innovators of Health 2.0. Here is the link. <http://www.youtube.com/watch?v=nN8vU-UiElw>

It shows the power of data linkage as outlined in the plans of the Populations Subcommittee. Further application of that data is shown in the interactive link below for Sonoma County-- informing and improving health. Example <http://hcn.sonoma.networkofcare.org/modules.php?op=modload&name=NS-Indicator&file=index>

2. Video of winners of health 2.0 challenge (each presentation about 4-5 minutes) There are 5 winners announced in October 2010 and they demonstrate the potential and the challenges of using the web for health promotion. <http://health2challenge.org/> Team Ringful <http://health2challenge.org/blog/team-ringful/> shows how patients can enter data into their I Phone about their pain in a structured way and choose to whom the data should be sent. The site generates useful graphs and charts for patients to evaluate their responses to therapy over time.

Team Videntity using social networking Facebook for sharing health information using a health vault where the sharing is controlled by the patient. Info captured including weight, steps per day, BMI via open source software. The data can be directly uploaded from pedometers and Wii balance board and creates various charts and graphs. <http://health2challenge.org/blog/team-videntity/>