# HealthData.gov, Its Early Successes, and Recommendations for Maximizing Its Value

NCVHS Working Group Vickie Mays, Ph.D., MSPH February 23<sup>rd</sup>, 2017

### Work Group Letter to the Secretary 2014

- Usability of the data: "User friendliness" of the platform
- Use of the data: Data documentation and metadata
- Usefulness of the data: Timeliness of the data

#### **Outline For Today's Presentation**

- What is the Problem/HHS
   Charge/Anticipated Products
- Framing of the report driving the structure
  - 2014 Letter to the Secretary
  - Value of Data
  - Using Value Tag Lines
  - Data stewardship, Security
- 5 Recommendations
  - 30,000 foot perch?

### Work Group Letter to the Secretary 2014

- Usability of the data: "User friendliness" of the platform
- Use of the data: Data documentation and metadata
- Usefulness of the data: Timeliness of the data

# **VALUE**

# VALUE TAGS

## DATA STEWARDSHIP

## RECOMMENDATIONS

- 30,000 foot?
- Integrative approach—— Having just read the wonderful catalog above (first ten pages of the report) of different things folks have done with individual data sets, maybe what I was trying to suggest was a set of tools, a toolkit, to make it easier for HealthData.gov users to connect or exchange
- data among different data sets. I'm providing strategic and technical assistance to ten communities across the country trying to pull together data from different sectors (clinical health, public health, criminal justice, housing, schools, environment, etc.) in ways to help them identify and address ten locally defined community health challenges. For example, combine weather and housing and school and clinical data to help target and reduce childhood asthma attacks.
- http://www.academyhealth.org/about/programs/community-health-peer-learning-program

## RECOMMENDATIONS

- But there seem to be some similarities in these site visits. These ten communities are also trying to do the same thing: find the data sets they need, create multi-sector exchange, integrate the data in the ways needed to address the respective challenge. Sometimes it's the same kind of asthma data, just for different regions (TX, CA, OH). Sometimes it's the same sector of data (housing) but integrating with different data sectors in different communities (public health workers, or schools) to address different community health challenges.
- Could HealthData.gov aim to help all of these communities together by creating a national health database and tools for community learning health systems.
- ONC's Interoperability Roadmap talks about a national learning health system, and I'm wondering if HealthData.gov could be a core engine in that effort. A place for communities to plug and play. Something to help communities integrate the relevant social determinants of health they need to address local health challenges, reduce health disparities, improve health equity. What becomes important for purposes of these recommendations, maybe, is not just advances in the individual data sets, but advances in how to connect or synthesize them in useful ways for different communities, and ask users what they need. Tools to plug important health datasets together to better assess and understand how social determinants of health affect health status, and how we can use that in turn to address respective community health challenges. This seems to me to tap some key themes in recommendations 2, 3, and 4, but connect them in a different way. Hope this helps!" (Mark Savage)