

NCVHS SUBCOMMITTEE ON POPULATION HEALTH WORK PLAN

The National Committee on Vital and Health Statistics, which advises the Department of Health and Human Services on health information policy, is engaged in a multi-year effort to understand how communities can become learning systems for health. NCVHS defines “Community” as an interdependent group of people who share a set of characteristics and are joined over time by a sense that what happens to one member affects many or all of the others.

The Population Health Subcommittee is investigating the optimal use of data for community health purposes, which requires a broad range of knowledge and technical skill. For example, it involves systematically locating relevant available data; applying standardization and data stewardship techniques for using multiple types, levels, and sources of data; identifying data gaps and designing strategies for filling them; and understanding the appropriate uses and limitations of the data. Broadly speaking, local actors need access to a range of data and the analytical tools to convert diverse data into useful information, as well as multi-dimensional partnerships and a supportive national infrastructure to turn to for technical and analytical support. The benefits of the current data explosion can only be realized if the systems for making sense of data keep pace with their burgeoning volume and complexity.

These efforts involve facilitating two converging projects: 1) supporting Community Data Engagement; and 2) the Framework Project.

The Community Data Engagement Project focuses on bringing together communities, data ‘connectors’, and data suppliers to identify ways to improve communication and dissemination of data for community health activities. NCVHS hosted a Roundtable on October 27-28 to enable these groups to jointly identify issues and gaps and begin to develop recommendations NCVHS can make to improve the flow of information to support community public health.

The NCVHS Framework Project focuses on data classification, use, and analysis. The project is developing two complementary resources that, together, will compose the Framework: the Data Continuum, a multi-dimensional structure for organizing information about populations at different levels or scales; and the Methods Categorization, a family of methods to characterize data sets, secondary uses, techniques, and responsibilities. Together, these resources are intended to help community leaders determine what types of data are available to answer their questions and where to find them, as well as how to link and analyze them.

Both of these activities build on our previous NCVHS work to strengthen communities as learning systems for health.

Timing	Area	Tasks	Key actors, partners, advisors, targets	Convenings	Publicly available deliverables	Comments
Rest of 2014						
Dr. 1 by 12/15	1. Roundtable reporting	Write summary	SK, planning team, other R-t participants		Roundtable summary	Include stories, "color," quotes, major themes. (No FC approval needed)
		Begin work on recommendations to Secretary	Subcommittee, full Committee			Discuss initial list with full committee at Dec meeting, then finalize as in #4 below
Dec meeting	2. Community of Practice	a. Define objectives; explore options	Community Commons has offered a 'group space'			Can a FACA partner with a data intermediary? Phonecall with LG, JS, DJ re: this. Other questions: purpose, vehicle, curation, who's in charge. Discuss in Dec.
?		b. Establish COP, do outreach, launch	Core group: Roundtable participants.			
Feb meeting	3. Framework document	a. Reframe/revise Framework report; include alternatives for 3b (see below)	SK with co-chairs, Frwk working group		Evolving Framework report [title TBD]	Contents include fixed description, iterative framework, comment mechanism, periodic status updates.
? fall		b. Determine mechanisms for curation, recruitment for frwk development	Frwk Working Group, Committee, staff			Topic is integral to structured interviews with connectors (see 6b). Findings will influence curation, dev't, intended uses.
2015						
Dr. 1 by 1/12; final for Feb 27-28 meeting	4. Observations, Recommendations to the Secretary	Develop based on Roundtable findings. Include description of the environment & key Roundtable findings as context.	Co-chairs, Subcommittee, Roundtable participants		Letter to Secretary, Re: supporting community data engagement	Aim for FC approval at Feb mtng.
Late spring?	5. Community data literacy, community POV	Design, plan, hold, develop recommendations based on findings	Subc w/ P.Tang, L.Vaughn, V.Mays, other Roundtable participants	Workshop on community data literacy to meet local needs		Define it, ID system changes needed (e.g., presentation), consider how to support it

	Area	Tasks	Key actors, partners, advisors, targets	Convenings	Publicly available deliverables	Comments
	6. Platform alignment	a. Further research, visioning, consultations	Subc w/ connector Roundtable participants			
Dec & Jan		b. Design & conduct structured interviews w/ connectors & intermediaries on alignment & Framework	Frwk Working Group, Co-chairs, SK			Present NCVHS Framework as a potential tool (see 3c).
? fall		c. Plan roundtable based on findings from a & b	NCVHS co-host with RWJF?	Roundtable (workshop?) on platform alignment		
Timing TBD	7. Feedback tool on community data uses	Pull together findings and implications to date; clarify future purpose; revise tool as needed	Subcommittee & staff			
		Decide on the merits of getting tool back in the field	CDC/VEB; R-t participants			Distribute through community of practice? Other networks? Who will manage?
2016						
	8. Measurement in an era of linkages & big data	Plan a meeting to explore topic.	Pop Health Subcommittee	Roundtable on re-visioning measurement		
	9. Aligning Federal agencies to support community well-being	Conceptualize and plan a meeting.	Pop Health Subcommittee	Convene HHS, other agencies re: coalescing to tackle community well-being		Build on OMB guidance & current efforts in this direction, with community input (“voice”).