



RAPID

Reporting Assistance and Process Improvement Discussion

Subject Matter Expert Session 1: Data Governance

Vision: Healthy Communities, Healthy People



SUMMER VACATION PLANS?





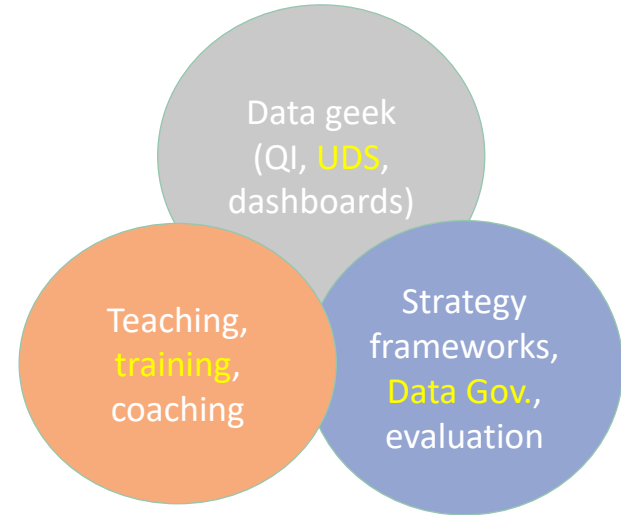
Jerry Lassa, MS
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Experience

- Hospital
- 2 health centers and an HCCN
- State and national trainings
- Adjunct statistics instructor



Areas of focus



Content presented today was developed through the Center for Care Innovations “Building a Data Driven Culture” program and in partnership with the HITEQ Center and PCAs and HCCNs across the country.

ROADMAP

Session 1:
Understand Your
Own UDS Reporting
(June)

Session 2:
Understanding Your
Measure of Focus
(July)

Session 3:
Working Towards
Your Goal
(August)

Session 4:
Planning for and
Spreading Success
(September)

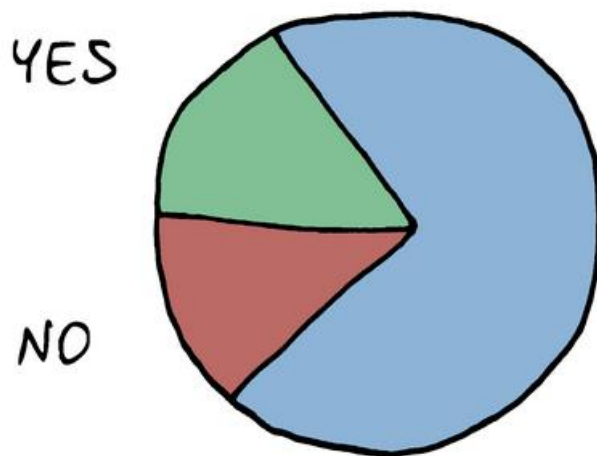
SME Session:
Data Governance

SME Session:
Workflow Mapping

How does UDS
RAPID fit into our
data governance
program?

How can we “hard wire”
measure improvements
from RAPID for long
term sustainability?

IS YOUR ORGANIZATION DOING DATA GOVERNANCE?



WHAT IS DATA
GOVERNANCE?

- How can we formalize our data governance practices?
- What roles do leaders, managers and staff play in data governance?
- How can we improve the data literacy of staff?
- How can a data governance program help us guide data focus and resource allocation?
 - e.g., UDS and value-based measures, EHR or PHM selection or optimization, data tools and support



FREQUENTLY ASKED QUESTIONS

YOUR RAPID PROBLEM STATEMENTS

Data Governance Related

- Currently navigating through **newly implemented value-based payment with Medicaid**
- Struggle getting clinical team on board to **understanding the measure** and providers documenting and coding properly
- We **don't have an agreed upon** standardized workflow
- Maintaining a consistent workflow because some providers and MAs are **not on the same page**
- **Struggle to teach and maintain** a consistent workflow **across many clinical sites**
- Do not have reliable documentation of external results in system.. lack standardized workflow identifying **roles and responsibilities**
- Screenings are not always documented the same way
- Clinical staff have **limited understanding of the CQM** and we have difficulty understanding/modifying EHR documentation and structured data fields
- **Data sharing problems** because of the increasing burden of documentation and reporting complexities, use of multiple systems that cannot interface electronically with each other
- Trying to **obtain reports from external** hospital systems
- Trying to improve the accuracy of documented screening provided to our patients, **but lack consistently followed** screening workflows across clinic sites because of ambiguous EHR click paths
- Need to ensure measures are correctly documented in the patient charts and that the **data analytics team is pulling the reports correctly**

OBJECTIVES FOR TODAY'S SESSION



Present fundamental concepts of data governance and its importance in building a data driven culture.



Share best practices for aligning people, processes and technology to build and grow a data driven culture and advance literacy.

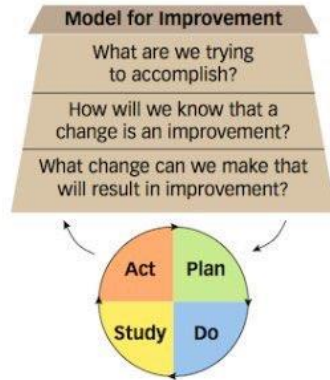
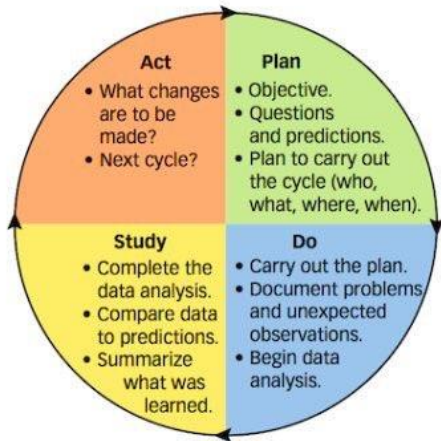


Explore how to leverage data governance approaches and tools to help manage and sustain UDS measure improvements.

CLARIFY QI VS. DG

Quality Improvement

Using **data** to make positive change



Data Governance

Broadly prioritizing and resourcing opportunities where **data** can make positive change

–AND–

Ensuring that **data** supports sustained change



WHERE TO START? SHARED LANGUAGE

When is our next
Data Governance
meeting?

Data viz tools
and **self-service**
access to data
would be helpful

We really need to
improve the **Data Literacy**
of our staff



We should bring in
the **Data Services**
department to help
with this

We can help
prioritize **Data Management**
needs

I'd like to be the
Data Steward
for the Peds
team

DATA DRIVEN ORGANIZATIONS



| Date/Report Request | Program Dept | St. Leader | Steward | Impact/ Cost/ Benefit | Timeline |
|---------------------|--------------|------------|---------|-----------------------|----------|
| | | | | | |
| | | | | | |
| | | | | | |



Data Stewardship

- Experts (or passionate staff) within a clinic site and/or department are assigned as data stewards for key UDS and other measures of focus
- Measure responsibilities are defined for data quality, data literacy and data use
- Stewards are supported by giving them authority and allocating time

Data Governance

- A forum is designated where decisions are made, priorities set, and resources allocated to improve data management and use for UDS and other priority measures
 - This may be an existing committee or management forum, ideally multi-disciplinary
 - Or start small (or from where you are at), add value, engage senior leaders, and grow from there

Data Services

- UDS and other measure data/report requests are prioritized by the staff or team that analyzes data for the organization
 - This may be a QI, IT or data analyst function
- Data and reports are accessible to relevant staff, presented in ways that are meaningful to their role, and are actionable

Data is organizational currency

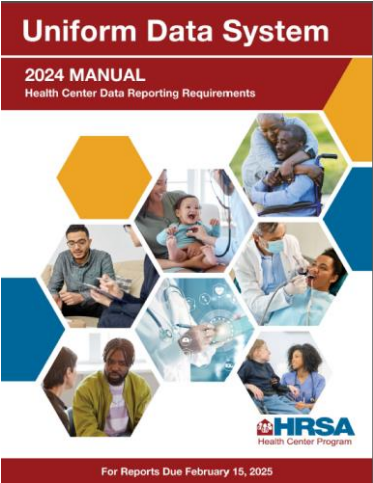
Organization Assets

- Capital
- Human Resources
- Technology
- Brand
- Facilities
- Data

UDS DATA = ORG CURRENCY

Community Health Quality Recognition (CHQR or “Checker”)

For quality improvement achievement in Access Quality, Equity, Health IT



5% of
~1,500 HCs
& LALs



Meet or exceed national benchmarks for one or more of the clinical quality measures (CQM) groups that promote BH, cancer screening, diabetes health, heart health, HIV prevention and care, maternal and child health



| Measure | Must meet |
|-----------------------|-----------|
| 1st tier (top 10%) | Gold |
| 2nd tier (top 11-20%) | Silver |
| 3rd tier (top 21-30%) | Bronze |

For best overall CQM performance



More info at: <https://bphc.hrsa.gov/focus-areas/health-center-performance-impact>



FYI



Primary Health Care Digest

UDS Office Hours: Using Data/Reports for Quality Improvement

Join us to learn how to use the latest Uniform Data System (UDS) data reports for program management and quality improvement.

Wednesday, August 14

2:00-3:00 p.m. ET

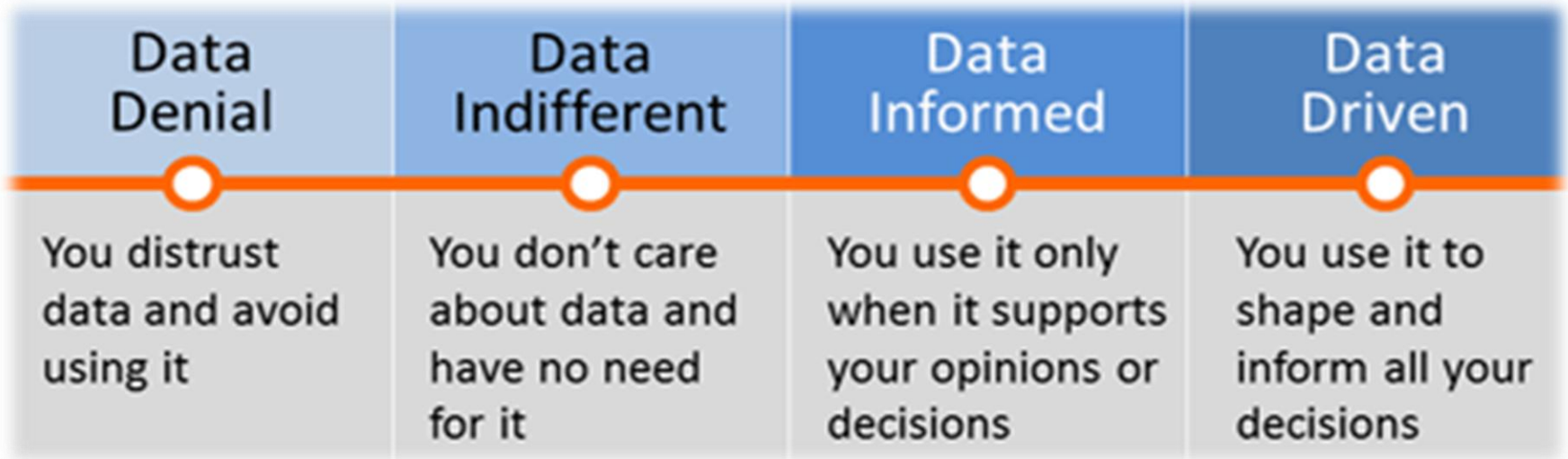
[Registration page](#)



Whether you're new to UDS or looking to refine your expertise, we will provide strategies to optimize UDS data assets to support reporting practices. We will discuss these reports, which are available in EHBs:

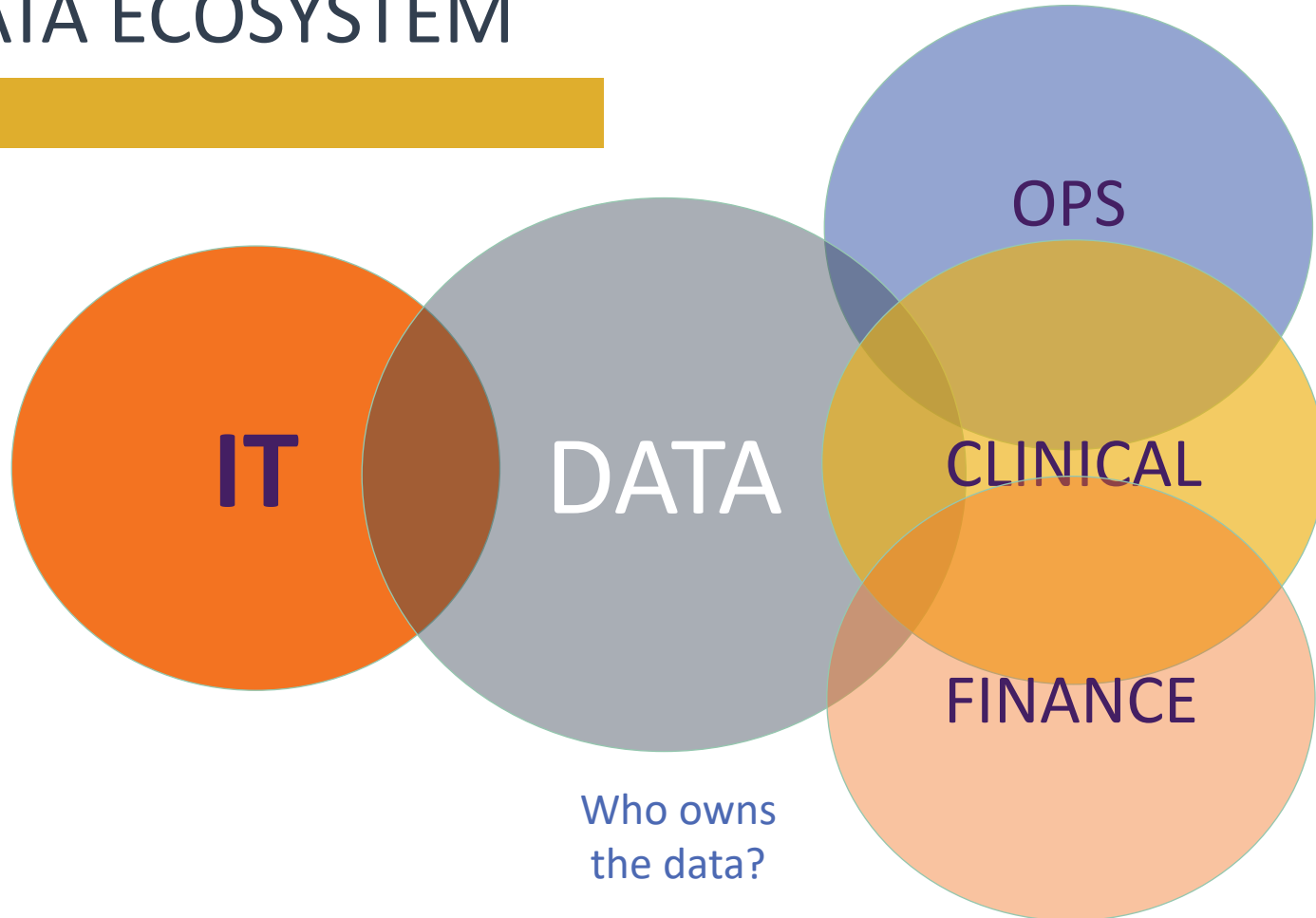
- 2023 UDS Report
- UDS Summary Report
- UDS Health Center Trend Report
- UDS Health Center Performance Comparison Report
- UDS State and National Rollup Reports

Attitudes and Behaviors Around Data



Where is your health center at?
Where would you like to be?

DATA ECOSYSTEM



Who owns
the data?

DATA GOVERNANCE:

The people, processes & technology orchestrated to maximize the value of data to an organization.





IF DATA GOVERNANCE IS THE ANSWER, WHAT'S THE QUESTION?

*Does your organization have
issues with data quality, data
literacy and data access?*



WORKING SINGLE HANDEDLY?



Not **A**ccurate



Not **C**omplete



Not **T**imely



TRYING TO FIND YOUR WAY IN THE DARK?



"I'll pause for a moment so you can let this information sink in."

IN WHAT WAYS ARE YOUR HANDS TIED?

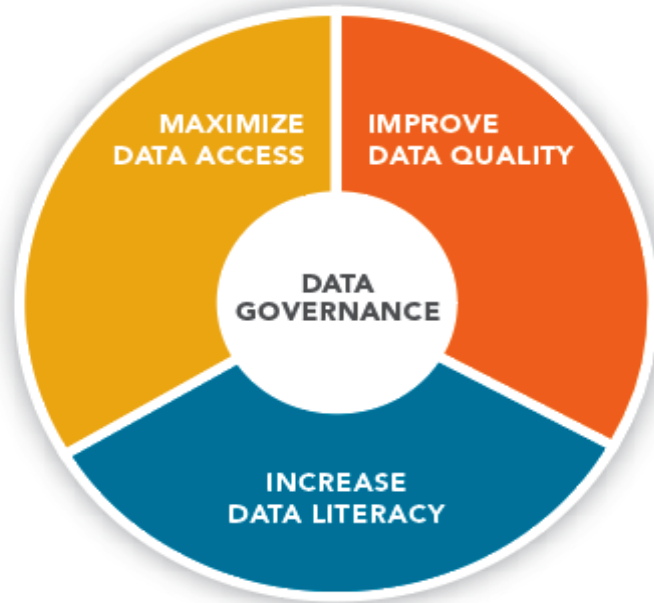


Denied access to what you need



Unable to find the right data

THE “TRIPLE AIM” of DATA GOVERNANCE



1. Improve Data Quality
2. Increase Data Literacy
3. Maximize Data Access

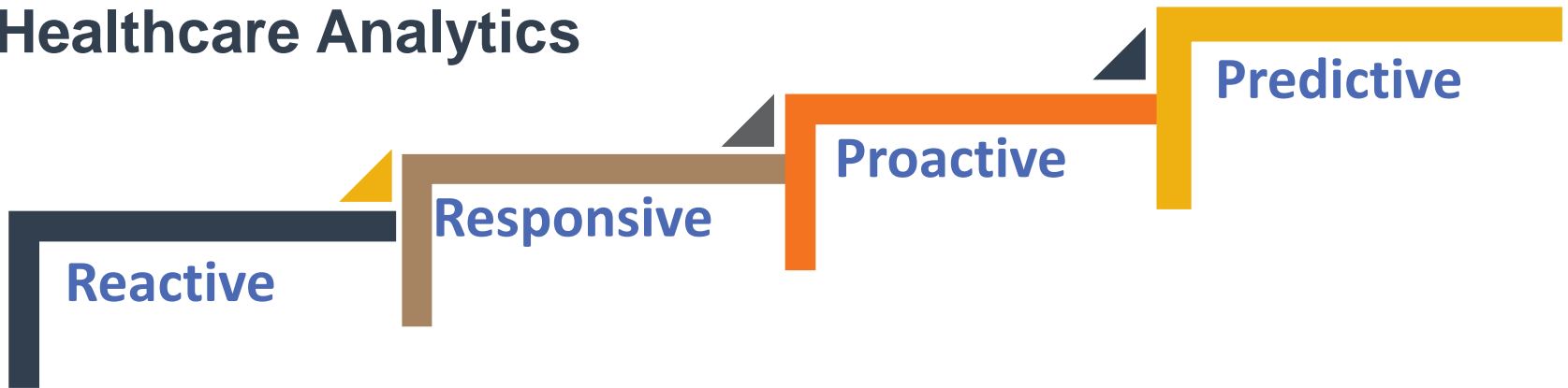
HOW WELL DOES YOUR CENTER ADDRESS THE TRIPLE AIM OF DATA GOVERNANCE?



- Is your measure focus aligned with organization strategy and/or priorities?
- Is there clear accountability for measure data quality throughout the organization?
- Do visual displays of measures trigger action for all stakeholder audience?
- Are measure data and analysis tools accessible to all data stakeholders?

How to Build Analytic Capability?

Healthcare Analytics



Building a Data Driven Culture

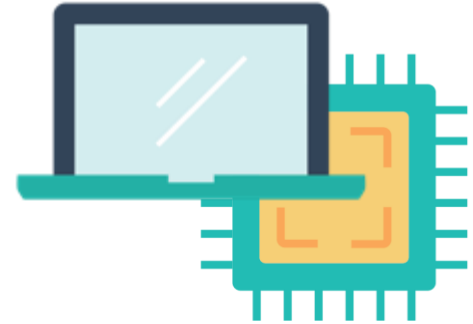
KEY ORGANIZATIONAL LEVERS



People



Processes



Technology

EXAMPLES OF DATA-RELATED CHALLENGES

People

- Staff are not aware of how clinical quality and other measures are calculated
- Staff don't have experience reviewing, discussing, or presenting measure data

Process

- Data/measure quality is not assessed periodically
- Data/measures are not reviewed on a regular basis and are used inconsistently

Technology

- Inefficient data capture (e.g., EHR, PHM workflows – more next session)
- Lots of data/measures available for some departments and not as much for others
- Care teams require more detail and drill-down on measures and variance

ANALYTIC CAPABILITY ASSESSMENT FACTORS



People

- Senior Leader Sponsorship
- Data Stewardship
- Clinical and Business Analysts
- Data Driven Culture



Process

- Data Strategy
- Data Governance
- Performance Measurement
- Data Quality
- Analysis of Data
- Acting on Results



Technology

- IT Tools and Support for Analytics
- Integration
- Self Service Analytics



“SUPER FACTORS” TO BUILD A DATA DRIVEN CULTURE

- Data Stewardship
- Data Governance
- Data Services



DATA STEWARD

- A person responsible for the accuracy and completeness of data within a department, domain or project
- The cornerstone of good data management and “democratizing data”

THE DATA STEWARD ROLE



Role or function, not a “title”.



Sound business knowledge or expertise in a department, domain or special project.



Coach others on data quality & literacy with good communication, teaching and negotiation skills.



Help to set priorities for data analysis and report requests within their domain.



Work with other stewards as part of data governance team.

IDEAS FOR ACTION

Data Stewardship



- If a data steward has not been identified, who is the logical choice? If a data steward has been identified, what is working and how can these responsibilities be embedded?
- Define the role, skills and competencies of data stewardship and incorporate it into job descriptions.
- Data stewards help prioritize the data and information requests that can overwhelm analysts.

Poll



Is someone designated as the Data Steward for your RAPID measure of focus?

- Yes (formal steward designated)
- Yes (informal steward)
- Responsibilities are shared across staff (clinic staff, QI, HIT)
- No, but planning to
- Other?

DATA STEWARDSHIP OF UDS MEASURES

- Keep up-to-date with measure definition/spec changes
- Monitor data hygiene/quality to assess accuracy, completeness, timeliness
- Participate in RAPID series 😊
- Identify opportunities to improve:
 - People (patient education, staff training, etc.)
 - Process (workflows, P&Ps, JDs)
 - Technology (EHR, patient portal, PHM optimization)

DATA GOVERNANCE:

- How do we get started?
- What are the things you do?
- Who should be involved?
- What does capacity building look like?
(decisions, resources)



IT'S ALREADY HAPPENING...

- Privacy and security policies
- HIPAA, authorized use
- CURES Act
- Federal and State reporting
- HIE participation
- Purchasing or replacing data tools (EHR, PHM, Data Viz)

→ UDS Measures

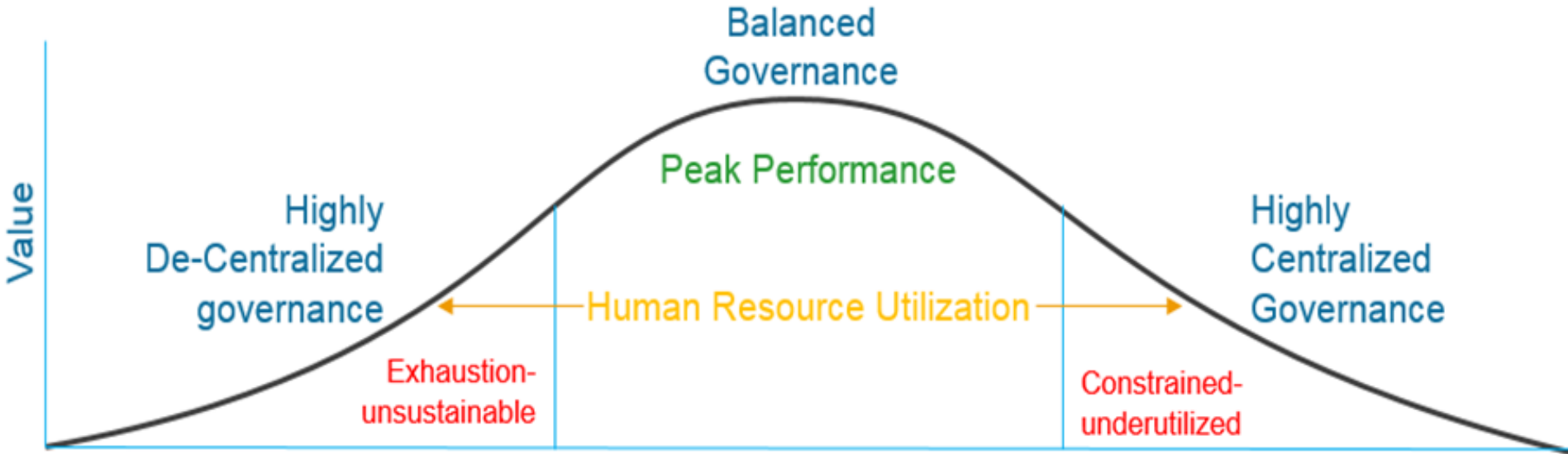


A man with short dark hair and glasses, wearing a blue button-down shirt, is speaking and gesturing with his right hand. He is positioned in front of a large window that looks out onto a green landscape. The background is slightly blurred.

Data Governance Thought Leader

Dale Sanders
Strategic Advisor,
Health Catalyst

DATA GOVERNANCE PARALLELS CIVIL GOVERNANCE



Tribal

Democratic

Authoritarian



DATA GOVERNANCE COMMITTEE

- The “Supreme Court” of data management
 - Decision making body and/or
 - Working Group

What are some things that a DG Committee does?

- Allocating scarce resources for analytics, setting priorities and *communicating those priorities to staff*
- Organizing and resourcing data quality improvement projects
- **Aligning data strategy with organizational strategy and monitoring progress**
- Deciding who can make changes in EHR settings
- Act as the “Supreme Court” for the Data Services department (or function) in an organization

IDEAS FOR ACTION

Data Governance



- Data Governance resides in the QI Committee; monthly meetings
- EHR implementation team reconvened/configured to become DG Committee
- DG issues are a standing agenda item on the Executive Team meetings

Poll



Has, or will, your data governance function receive updates about RAPID measure efforts and findings?

- Yes, in a formal DG forum
- Yes, in an informal DG forum (QI, HIT or other leadership)
- No, but we'll reconsider 😊
- Other?

DATA GOVERNANCE OF UDS MEASURE LIFECYCLE

Data Governance Function Role

- Train data stewards on how to support their measure lifecycle
- Recommend measure documentation to have and maintain
- Define measure lifecycle assessment criteria
- Receive measure lifecycle updates, help prioritize measures of focus, sponsor efforts and allocate resources



Measure Lifecycle Assessment Criteria

- Measure performance
- Data quality, literacy and use
- Workflow integrity

Actions

- Prioritize measure focus (including equity focus)
- Advise on ideas for action (people, process, technology)

DATA GOVERNANCE REPRESENTATION



I'll support technology-related resources for data management.

I'll project manage, support assessment and track achievement.

I'll assess financial impact and ensure front and back office support for data management efforts.

I'll facilitate prioritization of data projects that help us achieve our strategic goals.

I'll ensure we implement the project and achieve the intended impact.

MANAGING THE UDS MEASURE LIFECYCLE

| # Quality of Care Measures | Health Center vs. State | | | | | | | |
|---|-------------------------|------|------|-------|-------|------|------|-------|
| | Health Center | | | | State | | | |
| | 2020 | 2021 | 2022 | Trend | 2020 | 2021 | 2022 | Trend |
| <u>Perinatal Health</u> | | | | | | | | |
| 1 | 82% | 86% | 84% | | 77% | 77% | 76% | |
| 2 | 6.5% | 7.2% | 7.0% | | 6.8% | 7.3% | 7.1% | |
| <u>Preventive Health Screening & Services</u> | | | | | | | | |
| 3 | 56% | 58% | 60% | | 52% | 55% | 58% | |
| 4 | 41% | 40% | 42% | | 47% | 49% | 52% | |
| 5 | 62% | 70% | 67% | | 60% | 66% | 65% | |
| 6 | 69% | 59% | 45% | | 61% | 58% | 59% | |
| 7 | 86% | 78% | 86% | | 84% | 83% | 86% | |
| 8 | 24% | 28% | 29% | | 37% | 40% | 42% | |
| 9 | 44% | 42% | 34% | | 40% | 39% | 34% | |
| 10 | 69% | 70% | 69% | | 59% | 65% | 67% | |
| 11 | 15% | 19% | 16% | | 11% | 14% | 15% | |
| 12 | 79% | 79% | 79% | | 44% | 55% | 57% | |
| 13 | 62% | 64% | 64% | | 38% | 44% | 52% | |
| <u>Chronic Disease Management</u> | | | | | | | | |
| 14 | 73% | 74% | 71% | | 69% | 70% | 73% | |
| 15 | 70% | 78% | 74% | | 77% | 76% | 74% | |
| 16 | 56% | 53% | 61% | | 56% | 57% | 61% | |
| 17 | 41% | 42% | 41% | | 37% | 35% | 33% | |
| 18 | 55% | 93% | 100% | | 81% | 84% | 80% | |
| Better than State | | | | | | | | |
| Within 3% | | | | | | | | |
| Worse than 3% | | | | | | | | |

| Equity Focus | | | Data Hygiene / Data Quality | | | | |
|---------------|---------|---------------------|-----------------------------|--------------|---------|------------|--|
| R/E | Actions | | Last Audit | Findings | | Actions | |
| Low-High | | | | People | Process | Technology | |
| | | | | | | | |
| Assess equity | | Ensure data quality | | Take actions | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Monitor performance



DATA SERVICES

- Department or function
- Tactical arm of strategic data governance
- Analysts/analysis skills
- Business intelligence, data visualization (viz) and self service tools

PRIORITIZING DATA SERVICES REQUESTS

**Southcentral
Foundation**
Anchorage, Alaska



Staff member
identifies
information/data
need.

Data Steward
prioritizes
request
considering all
departmental
needs.

Data Steward
and Data
Services agree on
top 3 requests.

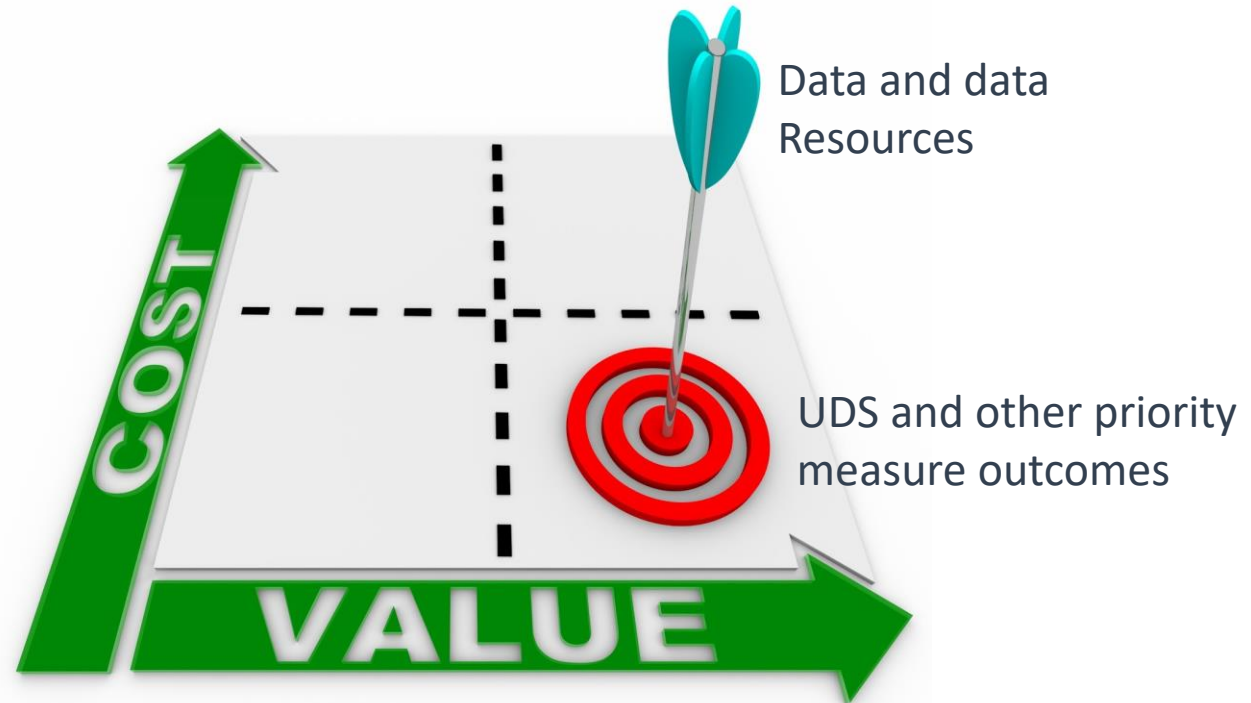
Requests are
prioritized across
domains as part
of data
governance.

EXAMPLE: DATA INITIATIVE REQUEST TRACKER

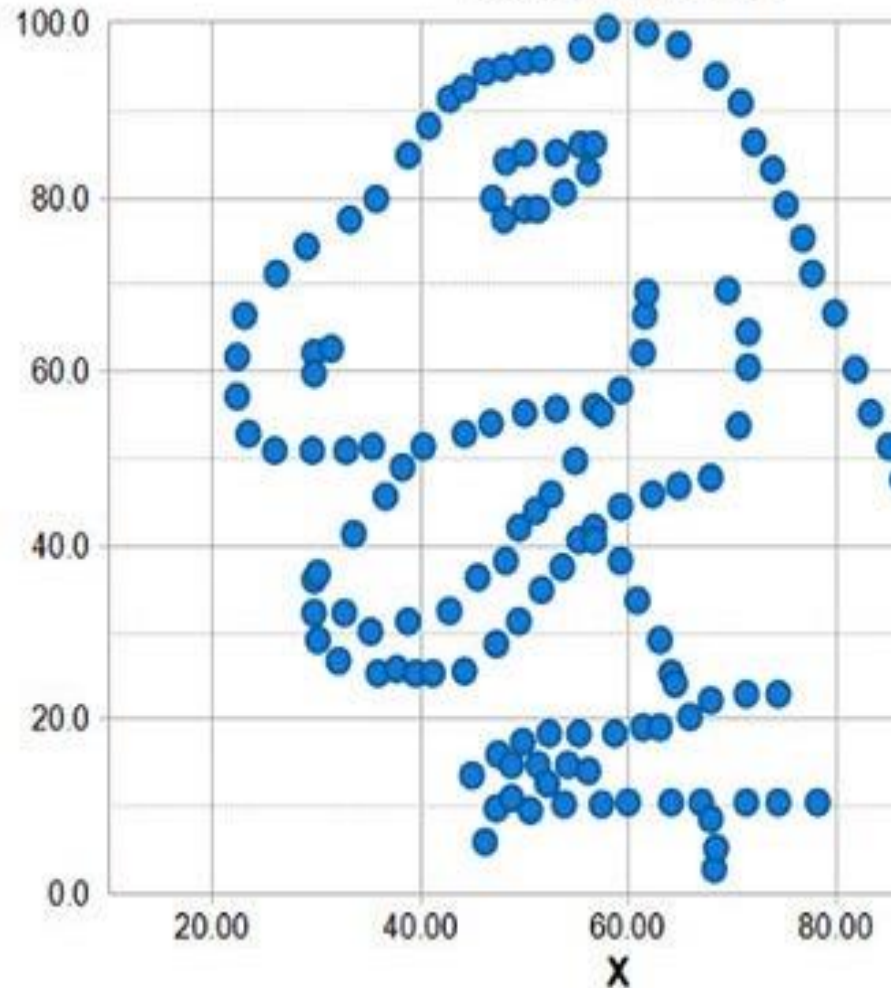
| Data / Report Request | Program / Dept. | Leadership Sponsor | Steward | Impact/ Cost-Benefit | Timeframe |
|---|-----------------|-------------------------|-----------------------|------------------------------|-----------|
| SDOH screening and linkage rates report | All | Maricela, Site Director | George, MA | \$15K MCO incentive | Q1 |
| Depression screening and follow-up workflows in EHR | Adult team | Sheila, BH Director | Marisol, Case Manager | \$25K Health plan incentives | Q1 |
| Cancer screening outreach campaign (portal) and reports | Adult team | Betty, Nursing Director | Myrian, RN Adult team | \$50K quality award | Q2 |
| High Utilizer Analysis | All | Daisy, CMO | Mai Lynn, QI | 10% reduce cost/patient | |

A simple spreadsheet format can be used

GOAL: LEVERAGE DATA FOR BIGGEST IMPACT



Datasaurus



DATA LITERACY

- The ability to read, understand, create and communicate data as information.
- Much like literacy as a general concept, data literacy focuses on the competencies involved in working with data.

HELPING STAFF DEVELOP DATA LITERACY

More experience
with entering and
reviewing data



Less experience with
aggregating and
analyzing data

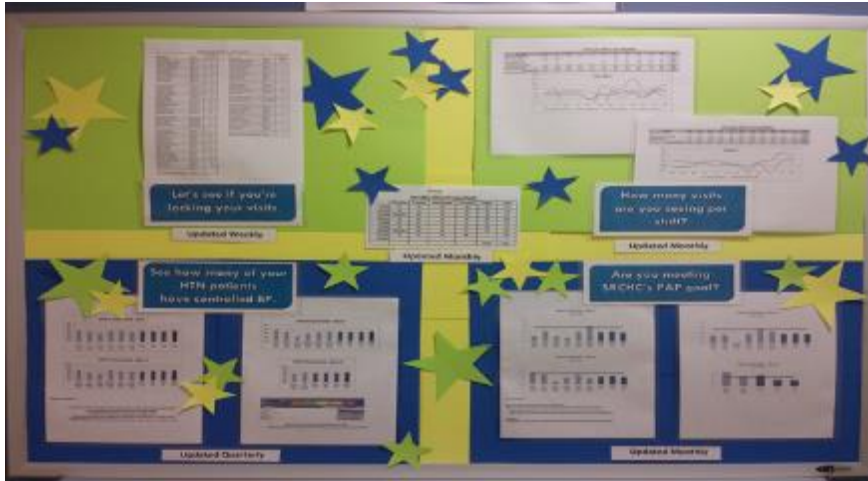


WHY should I
care about using
data in my role?

WHAT types of
data should I
know how to use?

HOW can I best
communicate
with data?

VISUAL DISPLAYS HELP IMPROVE DATA LITERACY



What story is the data telling us?
“Improvement Corner”




Visual presentation of data in ways that staff can easily identify what action they need to take.



TOOLS & RESOURCES

- CCI Academy - Short Course Videos and Tools
- Analytics Capability Assessment
- Data Governance Handbook



CCI
CENTER FOR CARE
INNOVATIONS

Sign Up Login

Let's Design A Better Safety Net - Together.

At CCI Academy, we help you design and deliver better services in your community.

<https://academy.careinnovations.org/>



Building a Data Driven Culture

Make the most of your organization's data. This course offers practice in concepts, techniques and tools to help you be more strategic and reap value from the technology systems you've invested in.

Tools

Analytics Capability Assessment

Instructions: Evaluate each question in the first column of the assessment matrix and select a score that reflects your organization's capability by circling a corresponding number. Total your score in each of the three domains then divide by the number of factors in each one (People = 4, Process = 8, Technology = 8) to determine your average score for that domain. To assess your organization's capability level overall, total the scores of each domain and divide by 3. General characteristics of each level are described below.

| Capability Levels | Naive | Response | Proactive | Predictive |
|-------------------------|--|--|---|---|
| General Characteristics | No evidence or very limited evidence of capability. Incremental efforts to get data, access to information for the frontline, situational reporting. | Some departmental evidence but not integrated or aligned. Siloed data, metrics, standardized reporting through IT, required data capture at department level, some historical trending and analysis. | Evidence of an emerging integrated approach. Clinical and business process improvements based on analytics, analysis during change and strategy, culture change, integration of measure across domains (clinical, financial, operations, patient experience). | Fully integrated and aligned organizationally, leading edge tools and skills. Data services provide robust support across the health center, automated analytic results are fed back into predictive models for value driven health care. |

ASSESSMENT

| PEOPLE | | | | | | | | | | | | |
|---|--|--|---|--|---|---|---|---|---|---|----|----|
| Capability Levels | Naive | Response | Proactive | Predictive | | | | | | | | |
| Senior Leader Sponsorship: Senior Leader Sponsorship assesses the degree to which leaders in the organization sponsor healthcare analytics efforts, advocate for a structured approach to analytics and allocate resources to it. | | | | | | | | | | | | |
| 1A. To what extent are senior leaders involved with and supportive of data efforts, issues and analytics in your organization? | Managers typically freight data issues as they arise, senior leaders are rarely involved in the detail of such issues. | Managers/Directors are responsible for departmental data issues and resolving problems as they relate to operations. | Senior leaders have responsibility for ensuring that data is available for driving decisions and allocate resources to ensure its quality, availability and timeliness. | Senior leaders sponsor efforts throughout the organization to ensure healthy data and analytics efforts, and ensure that departmental efforts are balanced and aligned to maximize the use of data as a strategic asset. | | | | | | | | |
| Score: | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 |

CCI Center for Care Innovations

Module 1, Lesson 3



Data Governance Handbook
IMPLEMENTING DATA MANAGEMENT PRACTICES IN HEALTH CENTERS

Module 2, Lesson 2



QUESTIONS

Send to:
jerry.lassa@datamatt3rs.com

Assistance Available

UDS Support Center

- Assistance with UDS reporting content questions
- 866-UDS-HELP (866-837-4357)
- udshelp330@bphcdata.net

HRSA Call Center

- Assistance with EHBs account and user access questions
- 877-Go4-HRSA (877-464-4772), Option 3
- http://www.hrsa.gov/about/contact/ehb_help.aspx

Health Center Program Support

- Assistance with EHBs electronic reporting or EHB account issues
- 877-464-4772, Option 1
- <http://www.hrsa.gov/about/contact/bphc.aspx>

UDS Mapper

- Assistance with the online service area mapping tool
- <http://www.udsmapper.org/contact-us.cfm>

