HRSA
Health Resources & Services Administration

RAPID

Reporting Assistance and Process Improvement Discussion

Subject Matter Expert Session 1:
Data Governance

DID YOU DRINK FROM THE WORLD CUP?

- Didn’t watch at all
- Oblivious viewer (watched with friends, family or SO but had no clue who won)
- Accidental viewer (on socials)
- Jumped on the bandwagon
- Super fan (watched every match and scheduled “important” meetings during kickoff times)
- Share any other fun stories

Jerry's Background

Experience:

35 yrs healthcare QI & data

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

RAPID ROADMAP

How does UDS RAPID fit into our data governance program?

PART 1: Review Action Work

PART 2: Understanding Data Quality

PART 3: Understanding Measure Specifications for UDS Reporting

PART 4: Measure FAQs

PART 5: Action items to complete prior to next session

Your last session

Your next session

Session 1, June 2026: Understand your

Session 2, July 2026: Understanding your Measure of Focus

Session 3, Aug. 2026: Working Towards Your Goal

Session 4, Sept. 2026: Making and Sustaining Progress on Your Goal

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

SME Session: Data Governance

SME Session: Workflow Mapping

Today!

HRSA Health Center Program

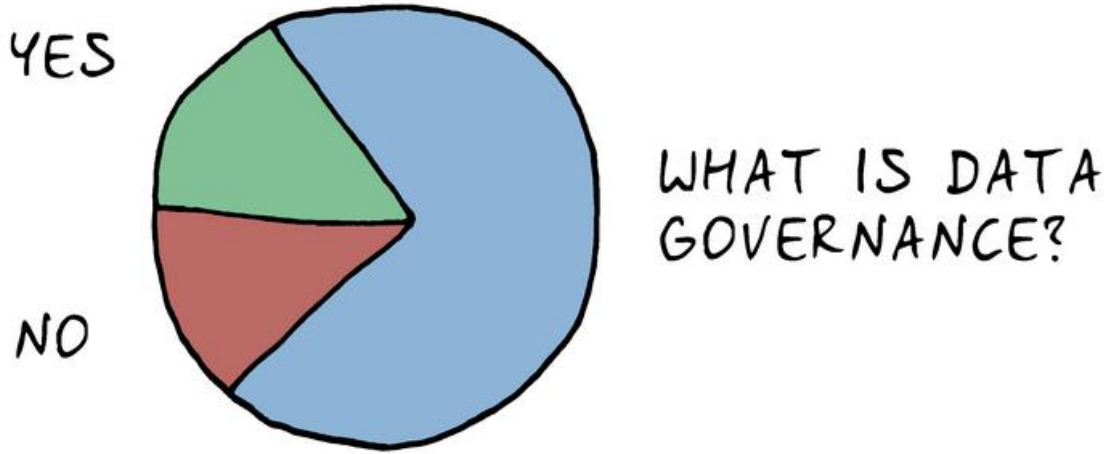
BARRIERS FOR YOUR CQMs

Your responses from Session 1

	Barrier	BCS	CRC	SUD I&E
	Patients lack access to needed services because of lack of insurance, transportation, etc.	18	14	15
DG-related	Staff lack the bandwidth or knowledge to understand the measure and expectations in order to provide and document services that meet it.	7	**22**	**30**
	Organization lacks referral partners who can provide needed services or supports.	0	1	4
DG-related	Data systems lack the workflow or transparency to improve documentation in order to achieve improvements in the measure	**20**	15	3

These data access, quality, and literacy barriers can be addressed through effective Data Governance.

IS YOUR ORGANIZATION DOING DATA GOVERNANCE?



Dataedo /cartoon

Piotr@Dataedo

- 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 in an ever-evolving data landscape?

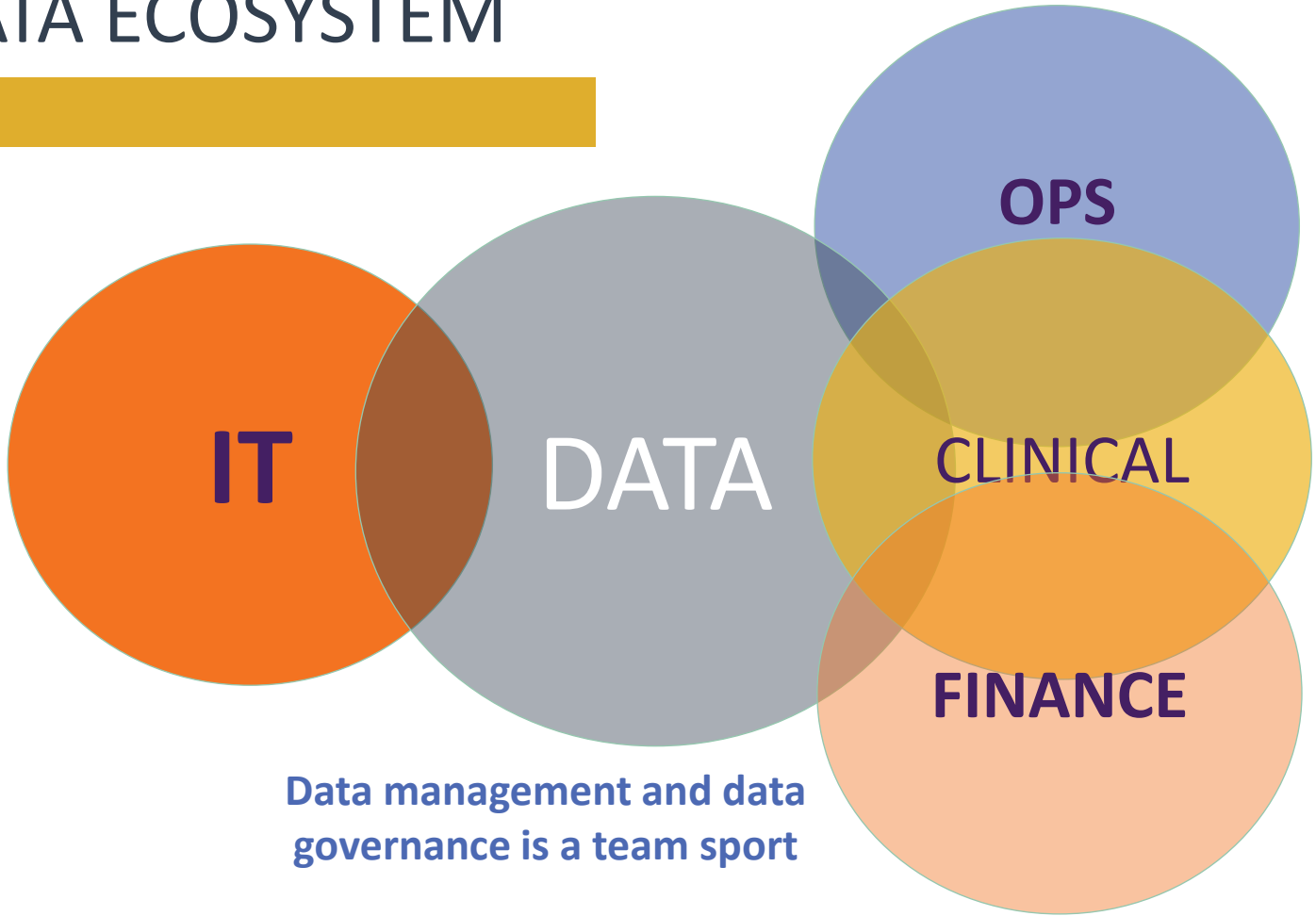
OBJECTIVES FOR TODAY'S SESSION

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 in an ever-evolving data landscape.

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

DATA ECOSYSTEM



Data management and data governance is a team sport

DATA DRIVEN ORGANIZATIONS

Data Stewardship

- Experts (or passionate staff) that monitor data quality and help advance data literacy and data use.

Data Governance

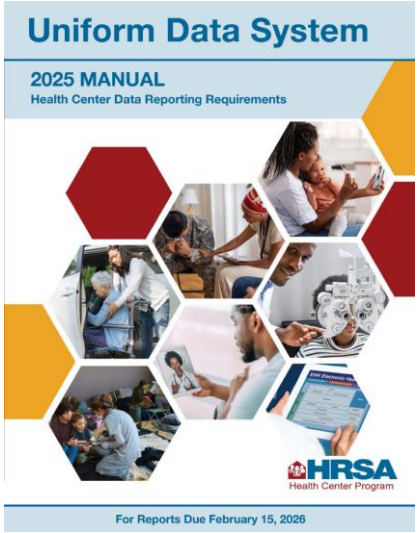
- Forum where data management-related decisions are made, priorities are set, resources are allocated, and impact is monitored.

Data Services

- Staff or team that analyze and manage data for the organization including making data and reports accessible and presented in an actionable way relevant to staff role.

Data Literacy

UDS DATA = ORG CURRENCY



Community Health Quality Recognition
(CHQR or "Checker")

Awarded in CY 2025 for the 2024 UDS reporting period

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

HCQL Badge	Decile of AQR Average
Gold	1st tier (top 10%)
Silver	2nd tier (top 11-20%)
Bronze	3rd tier (top 21-30%)

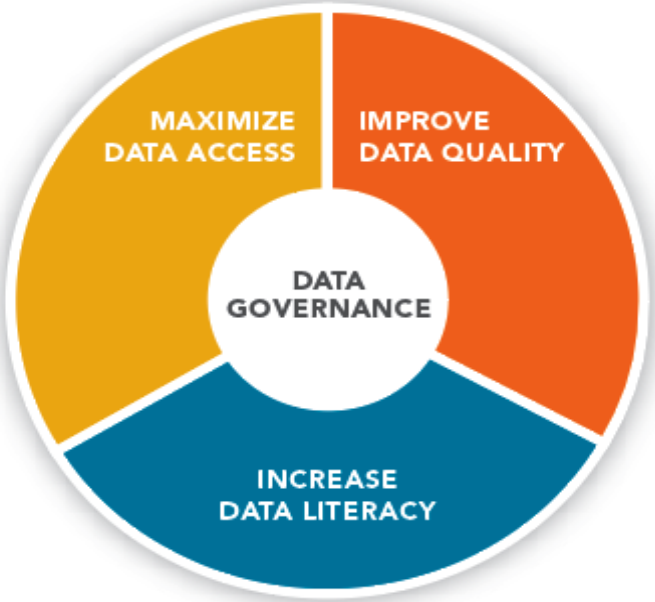
For best overall CQM performance based on Adjusted Quartile Ranking (AQR) from the most recent reporting period

More info at: https://bphc.hrsa.gov/initiatives/advancing-health-center-excellence/community-health-quality-recognition-chqr-overview
CHQR Dashboard at https://data.hrsa.gov/topics/health-centers/chqr

DATA GOVERNANCE:

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

THE “TRIPLE AIM” of DATA GOVERNANCE

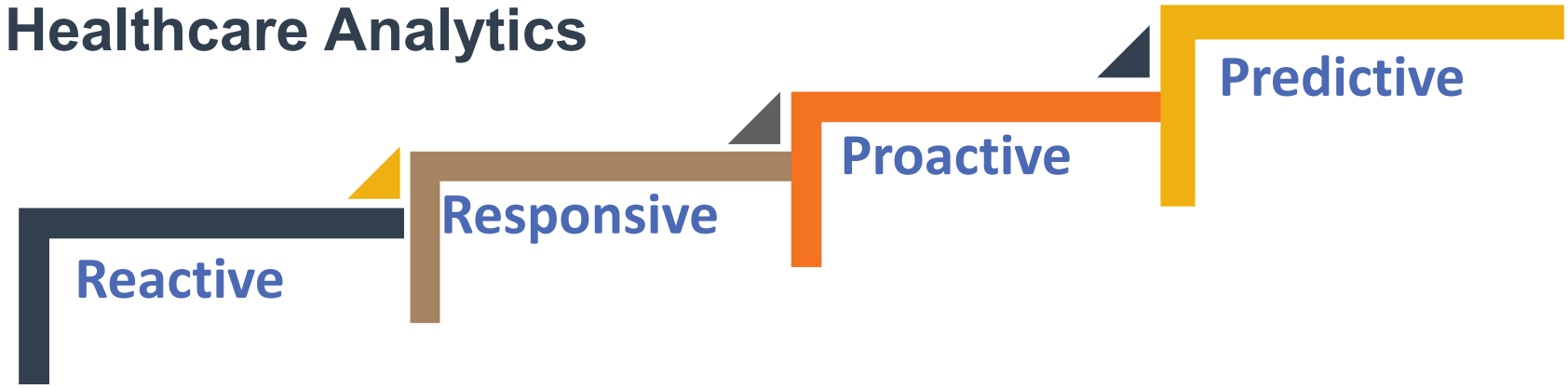


1. Improve Data Quality
2. Increase Data Literacy
3. Maximize Data Access

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?



KEY ORGANIZATION LEVERS & EXAMPLES OF DATA-RELATED CHALLENGES

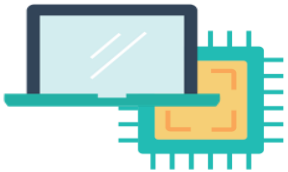
People

- 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

Tool available in CCI Academy (see resource link at end)

“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.

MEASURE-SPECIFIC EXAMPLES

- Breast Cancer Screening
  - Steward worked with a partner hospital to ensure mammo orders are entered appropriately so results will interface accurately. Steward found the rad techs at the hospital were changing the order (e.g., U/S indicated/not) such that results coming back were not getting linked to the original order to show it was completed.

- Colorectal Cancer Screening
  - Since there are many testing types that fulfill the measure, the steward is reviewing patient records to ensure these are recognized as compliant/adherent.

- SUD Initiation & Engagement
  - Steward is working on cleaning up a messy denominator and went through the full list of patients to ensure it included who is eligible.

Poll

Data stewardship (formal or informal) at your center (check all that apply):

- ❑ Stewards are designated for important UDS measure(s) of focus
- ❑ Stewards keep up-to-date on measure definition changes and inform the rest of the team
- ❑ Stewards actively monitor data quality for accuracy and completeness
- ❑ Stewards work with health IT to ensure documentation and workflows are efficient and effective
- ❑ Stewards help team members access and use measure results

DATA GOVERNANCE

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

IT'S ALREADY HAPPENING IN YOUR CENTER

Privacy & Security

NATIONAL ASSOCIATION OF COMMUNITY HEALTH CENTERS®

42 CFR Part 2:
Confidentiality of Substance Use Disorder Patient Records

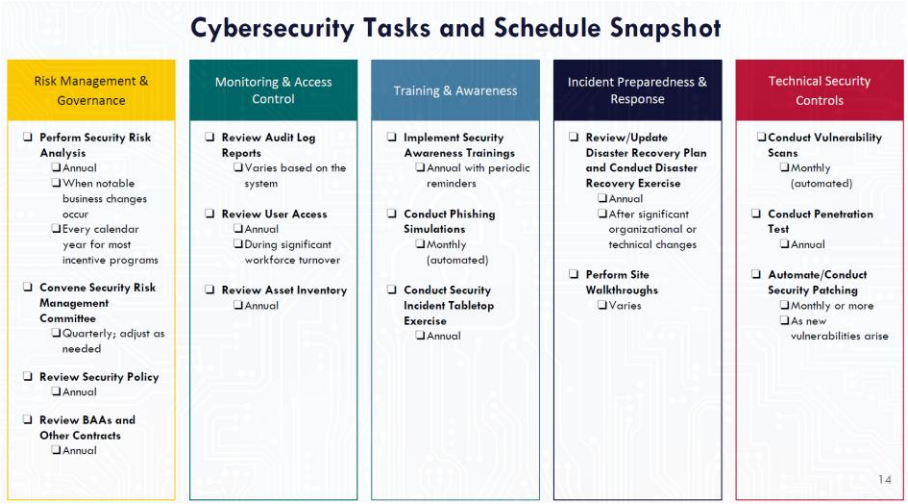
FACT SHEET

This Fact Sheet provides a high-level summary of the 2024 Final Rule on 42 CFR Part 2, highlighting key changes and their implications for community health centers (CHCs).

The 2024 Final Rule will impact CHCs in several ways, particularly in the areas of:

- Changes to patient consent and notice requirements
- Increased disclosure flexibilities
- Breach reporting requirements and additional penalties for noncompliance

Cybersecurity



HL7 FHIR

FHIR APIs & Patient Access Requirements

Entities Required to Implement FHIR APIs

Medicare Advantage (MA), Medicaid, CHIP Fee for Service (FFS), Medicaid managed care plans, CHIP managed care entities, and Qualified Health Plan issuers are required to implement, test, and monitor open HL7 FHIR-based APIs.

Purpose of FHIR API Implementation

This enables patients to access their claims and health data through third-party applications, empowering patient control and choice.

Key Considerations for Implementation

Implementation should consider API security, interoperability, regular testing, and compliance monitoring.

Importance of Collaboration and Communication

Collaboration with developers and clear communication to patients about data access is key for successful deployment.

HITEQ

A Practical Guide to Standards-Based Data Exchange and Information Blocking in Action for Health Centers

Session: February 17, 2026

NATIONAL ASSOCIATION OF COMMUNITY HEALTH CENTERS®

Action Guide

ARTIFICIAL INTELLIGENCE (AI)

AAFP + Rock Health Vision for AI in Primary Care

Five beacons for effective AI use

If AI can strengthen primary care effectively, it can:

- Ensure primary care continues to be the key source of preventive, continuous and team-based care
- Enable the delivery of deeply personalized care that builds trust and drives outcomes
- Serve as the steward of shared decision-making across the health care journey
- Become a key driver of population health decisions and outcomes
- Enable true team-based care where all members work at "top of purpose"

HEALTH INFORMATION TECHNOLOGY, HITEQ EVALUATION, AND QUALITY CENTER

A Framework for AI Readiness in Health Centers

February 25, 2026

Governance of AI in Health Centers

HITEQ

AI in the Health Center – Implications and Considerations

Session: March 3, 2026

Roles and Responsibilities

Define clear roles for leadership, Chief Information Officer (CIO), and privacy officer in AI governance.

Policies for Procurement and Vendor Oversight

Establish strict guidelines for selecting and monitoring AI vendors to ensure compliance and security.

Clinical Validation and Human-in-the-Loop

Implement requirements for clinical validation of AI tools and maintain human oversight in AI-driven decisions.

Approval Workflows

Design structured approval processes for AI adoption and deployment within the health center.

Audit and Accountability Mechanisms

Develop mechanisms for regular audits, performance reviews, and accountability in AI system use.

Transparency and Documentation

Maintain thorough documentation of AI models' purpose, limitations, and decision-making processes to ensure transparency.

+ Privacy & Security Implications of AI

AND…

- Federal and State reporting
  - → UDS Measures

DG POLICIES & PROCEDURES - EXAMPLE

Data Governance Policies & Procedures

for Community Health Centers

Table of Contents

Data governance vision and culture

Data security and privacy

Data literacy (platform access, data use)

Data sharing and exchange

Data ownership and data quality

Policies and procedures help formalize and sustain culture and practices

+ Artificial Intelligence

Template available in CCI Academy (see link at end)

DATA GOVERNANCE COMMITTEE

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

MEASURE PERFORMANCE DRIVES FOCUS

UDS Data Five-Year Summary

Age and Race/Ethnicity | Patient Characteristics | Services | Clinical Data | Cost Data

Clinical Data	2019	2020	2021	2022	2023
Preventive Health Screening & Services					
Cervical Cancer Screening	53.28%	47.27%	50.44%	50.63%	50.35%
Number of Cervical Cancer Screening Patients	23,636	21,288	23,191	23,275	25,456
Breast Cancer Screening		45.23%			
Number of Female Patients Aged 52 through 74 who had a mammogram to screen for breast cancer		10,25			
Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents	65.52%	58.18%			
Number of Children Age 3-17 with Weight Assessment and Counseling for Nutrition and Physical Activity	19,466	14,01			
Body Mass Index (BMI) Screening and Follow-Up Plan	72.29%	60.96%			
Number of Adult Medical Patients Age 18 and Older with Body Mass Index (BMI) Screening and Follow-Up	84,861	69,84			
Percent Adults Screened for Tobacco Use and Receiving Cessation Intervention	86.72%	83.52%			
Number of Adult Medical Patients Age 18 and Older Screened for Tobacco Use and Received Cessation Counseling	72,409	68,55			
Colorectal Cancer Screening	46.56%	42.74%			
Number of Patients Screened for Colorectal Cancer	21,191	19,44			

Measure focus may initially be guided by trends and assessing relative performance (vs. state, national)

Sample Health Center Performance Comparison Report

Individual health center performance

Healthy People 2020/ 2030 Goals

Average for comparison groups

Adjusted Quartile

	Health Center	Healthy People 2020 Goals[4]	Healthy People 2030 Goals[5]	Averages								Health Center Adjusted Quartile[6]
				CO	National	Rural	Size	Sites[1]	Special population Agricultural Workers[2]	Special population Homeless[3]		
							10,000-19,999	11-15	Below 25%	Below 25%		
				n = 19	n = 1373	n = 568	n = 405	n = 201	n = 1339	n = 1296		
QUALITY OF CARE INDICATORS/HEALTH OUTCOMES*												
Preventive Health Screenings and Services												
Childhood Immunization Status*	38.51%	-	-	45.44%	38.06%	36.26%	36.96%	39.36%	37.70%	38.04%		2
Cervical Cancer Screening*	57.82%	93.00%	84.30%	57.17%	52.95%	47.30%	51.38%	53.95%	52.90%	53.13%		2
Breast Cancer Screening	28.44%	-	-	47.21%	46.29%	46.84%	46.48%	48.19%	46.16%	46.36%		4
Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents*	58.63%	-	-	71.17%	68.72%	65.12%	67.81%	70.44%	68.89%	68.79%		3
Body Mass Index (BMI) Screening and Follow-Up Plan*	72.06%	-	-	58.78%	61.32%	64.30%	63.46%	64.10%	61.21%	61.49%		2
Tobacco Use: Screening and Cessation Intervention*	68.53%	-	-	99.14%	82.34%	81.81%	81.45%	84.32%	82.21%	82.50%		4
Colorectal Cancer Screening*	38.26%	70.50%	74.40%	41.07%	41.93%	43.08%	42.63%	43.55%	42.14%	42.17%		2
HIV Screening	20.54%	-	-	37.04%	38.09%	22.05%	34.66%	38.74%	38.45%	37.77%		3
Screening for Depression and Follow-Up Plan*	63.94%	-	13.50%	71.82%	67.42%	66.02%	66.28%	70.37%	67.53%	67.52%		3

DATA GOVERNANCE ROLES

Function	Role	Examples
Data Governance Committee	A forum or function that oversees data management broadly. Membership includes representation from all functional areas. May be a decision- making body and/or working group.	• Ensuring data validation priorities are aligned with organizational strategy • **Setting priorities for data validation efforts, allocating resources, and monitoring progress**
Data services	The department or function that manages the organization's data and supports all data needs (IT/HIT, data services, and/or QI)	• Establish requirements for data capture and assessing data quality. • Periodically review all reporting system libraries, interfaces, and mapped data to ensure they are accurate and up-to-date. • **Validate internal and external reports in collaboration with Data Stewards and the Data Validation Team.** • Advise the Data Governance function on priorities to improve data accuracy, completeness, and timeliness.

DATA GOVERNANCE ROLES

Function	Role	Examples
Data stewards	Experts (or passionate staff) within a clinic site and/or department that help ensure data quality, data literacy and use of that measure. Data stewardship is a role, not a title.	• **Ensure accuracy and completeness of data** • Coaching others on data quality, literacy, and use • Help set priorities to improve data quality and reporting • Work with other stewards to support data governance priorities
Data validation team	A cross-functional team of care team representatives, IT/HIT, data services, QI, and billing/coding that provide subject matter expertise	• **Ensure data validation approach considers all relevant aspects of clinical, operational and financial requirements** • Support data validation procedures in collaboration with the Data Services function and Data Stewards

DATA GOVERNANCE IDEAS FOR ACTION

	Short term (next 3-6 months)	Long term (next 1-3 years)
People	Examples • Staff training on EHR, PHM, and/or analytics tools; Who, how often, where? • Job description and/or role updates; Who should be doing what?	
Process	Examples • Workflow assessment and opportunity identification; align with people and technology • Schedule for data accuracy reviews of priority measures using data validation worksheet approach • Review and discussion in QI, HIT, and leadership forums	
Technology	Examples • EHR optimization: refine structured data fields, streamline workflows, reduce clicks • PHM, data tool optimization: refine mappings • Data integration – HIEs, health plan data, externa registries, etc.	

DG ACTION PLAN EXAMPLE

	Activity	Responsible	Timeframe
People	Update job description for MAs to include data stewardship role including daily/weekly review of priority fields to review in EHR/PHM.	HR, Clinic Managers	Q3
Process	**Define calendar for reviewing data quality of one measure a month**	QI Committee	Monthly/ Quarterly
	Conduct monthly data accuracy review	Data staff, data steward, DV team	
	Review findings of data accuracy review with QI committee. Define action steps, responsible staff, and timeframe	QI Committee	
Technology	Develop report for MAs that will help them quickly monitor and correct priority fields in the EHR on a daily/weekly basis		Q4

Poll

Data Governance (formal or informal) at your center (check all that apply):

- ❑ A forum exists where UDS data quality, data use, and data literacy topics are regularly discussed
- ❑ Analytics resources (data staff, process, and tool focus) are well aligned with quality improvement and other organizational priorities for UDS measures
- ❑ DG policies and procedures provide guidance on consistent UDS data management practices throughout the organization
- ❑ Staff in all departments are familiar with their UDS measures of focus and receive updates on measure progress

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
Remote Patient Monitoring program (DM and HTN)	Adult care teams	Dr. Maricela, Adult Med Head	George, MA	**$25K MCO incentive**	Q1
Access to care and empanelment	All	Frank, Site Director	Marisol, Case Manager	**$25K new patient revenue**	Q1
Cancer screening outreach campaign (portal) and reports	Adult team	Betty, Nursing Director	Myrian, RN Adult team	**$15K quality award**	
High Utilizer Analysis	All	Daisy, CMO	Mai Lynn, QI	**10% reduce cost/patient**	

A simple spreadsheet format can be used

DATA SERVICES TEAM - EXCEL SKILL DEVELOPMENT

1. Extracting data from EHR and other systems to Excel for further analysis
2. Cleaning up extracted data
3. Analyzing data using formulas and pivot tables
4. Combining data sets (e.g., EHR and claims data) using a common identifier (e.g., MRN).
5. Creating charts and graphs, dashboards and scorecards

DATA SERVICES - DATA VIZ TOOLS

Fill in Reporting Gaps

- EHR, PHM, or Excel may not fulfill all reporting needs
- Easy integration of internal and external data

Equip staff with data (Self Service)

- Provide easier access to data and reports
- Create visual displays that trigger action
- Provide easy drill-down by multiple variables (demographic, dx)

AI IS CHANGING DATA ANALYSIS

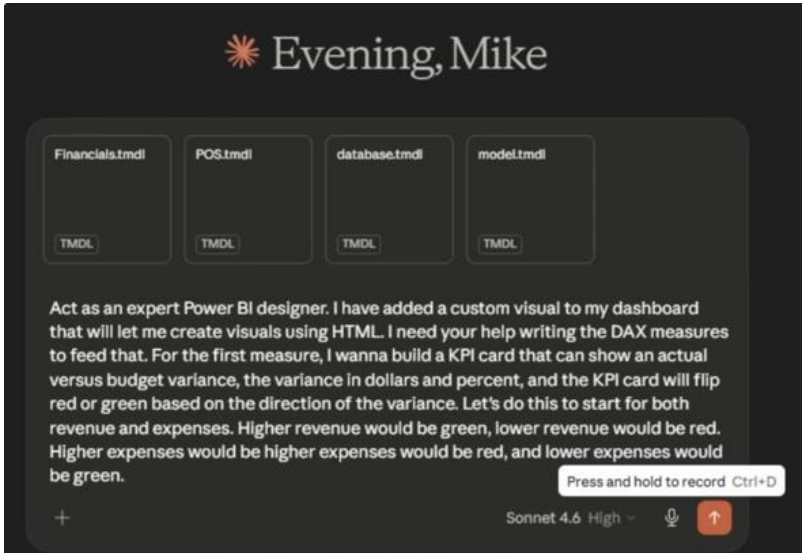
Claude

- AI assistant developed by Anthropic
- Assists with writing, coding, research, and data analysis through various large language modes (LLM, aka generative AI)
- Can be used via web app, mobile apps, desktop extensions, etc.
- Capable of working with HTML and DAX so is ideal for Power BI data viz development

Steps in Claude

1. Transcribe the visual you'd like to create
2. Upload Power BI project and data files
3. Claude will respond on what it found and if it has any questions, which you can respond to
4. Claude will generate HTML and DAX code to bring into your Power BI report

1. Transcribe the visual you'd like to create:



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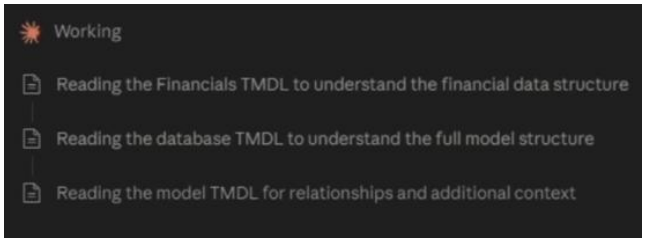

YouTube: "Claude just replaced my Power BI developer"
Mike's AI For Finance

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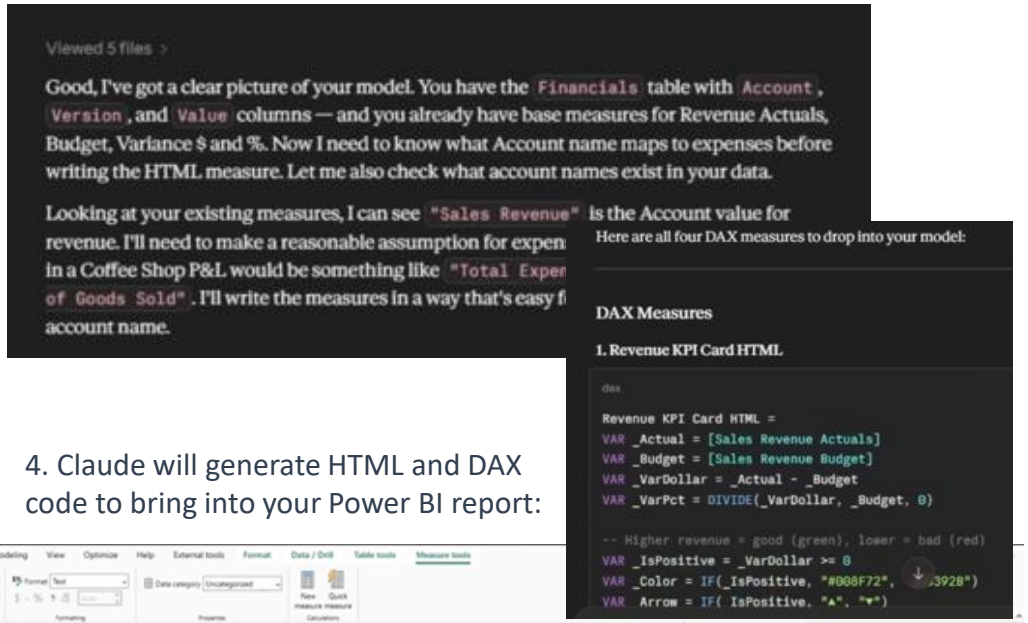

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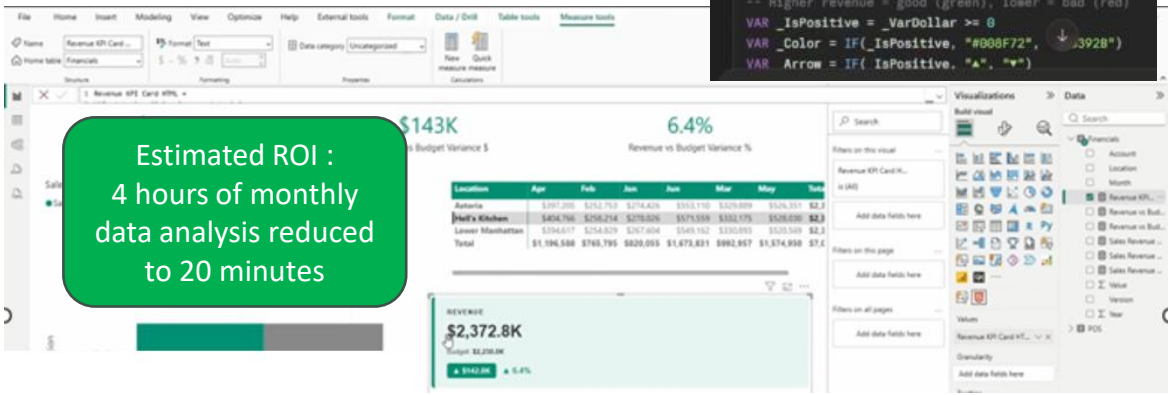
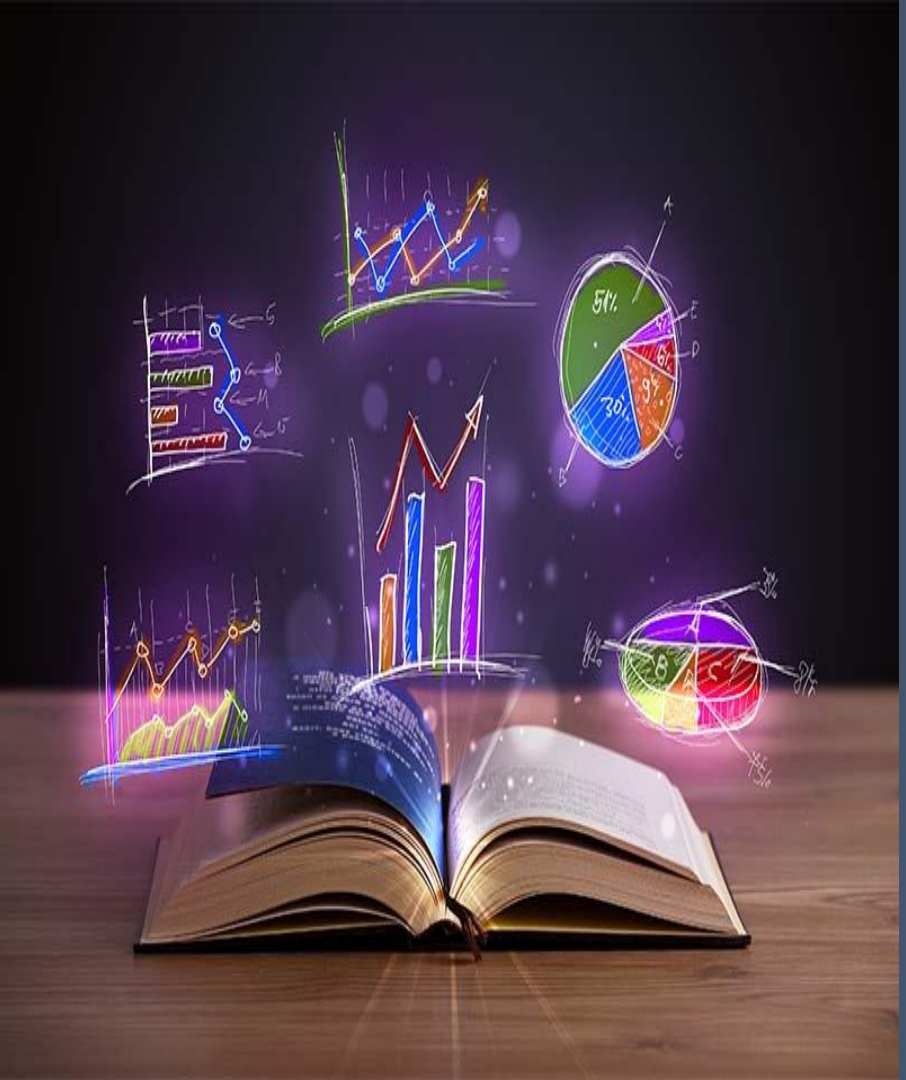


Poll

Data services and tools at your center (check all that apply):

- ❑ We periodically assess the data needs of all data users to identify gaps in access to needed data and in action-oriented reports or displays
- ❑ We systematically track and review data requests to ensure they are aligned with organization priorities and have ROI
- ❑ Analytics staff are appropriately prepared for their role and continuously develop their skill sets
- ❑ We periodically assess how to optimize use of the data tools we have and assess whether new tools could serve us better



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?

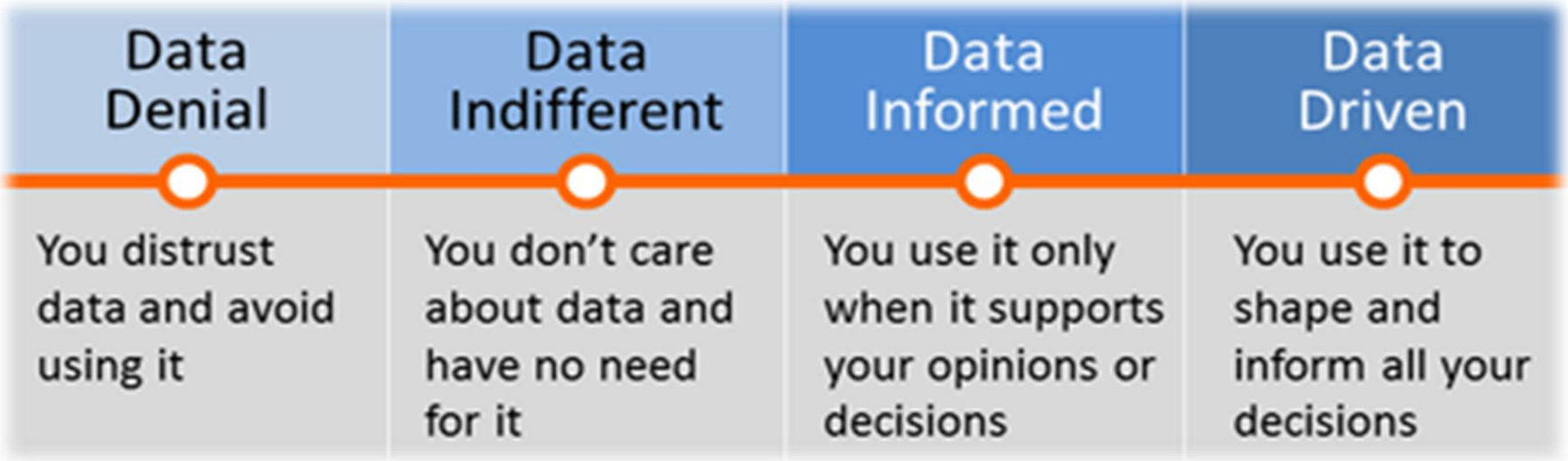
VISUAL DISPLAYS HELP IMPROVE DATA LITERACY

Tell a story with data.

"Improvement Corner"

Present data in ways that staff can easily identify what action they need to take.

DATA LITERACY CAN CHANGE MINDSET



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

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TOOLS & RESOURCES

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

Data Governance Resources for Health Centers

https://www.careinnovations.org/about/

The Handbook

Provides practical tools and step by step guidance with tools and worksheets for implementing effective data governance.

The Video Learning Series

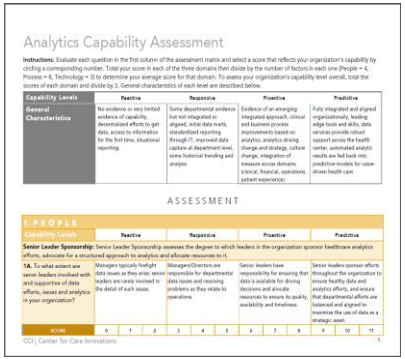
Can be used alone or as a companion to the Handbook. The components of the five chapters of this series with videos and tools are also linked to in the Handbook.

The Short Course

Brings together select content (videos and tools) from the Handbook and Video Learning series. A free CCI Academy account is needed to access this short course.

1. Data Governance Handbook (online and download enabled)
2. Building a Data Driven Culture: A Video Learning Series (online, no log-in needed)
3. Building a Data Driven Culture: A Short Course (online through CCI Academy, free account needed)

DG Policies and Procedures Template available here also!



Module 1, Lesson 3

Data Governance Handbook
IMPLEMENTING DATA MANAGEMENT PRACTICES IN HEALTH CENTERS

Module 2, Lesson 2

QUESTIONS

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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/ehbhelp.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