**Action Items for Next Steps**

**QI Award Project on Making Connecticut Department of Public Health (DPH) Databases Compliant with the DPH Policy on Collecting Sociodemographic Data (September 2008).**

**Project Period: March 1, 2012 to November 30, 2012**

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It is recommended that the CT DPH:

1. Institutionalizes the QI process and conducts an annual review of the DPH databases that were identified as not being in compliance with the CT DPH data collection policy with respect to the fields specified in the QI Award project, namely race, ethnicity, gender, and age. The annual review will identify new databases that have been created or are in the development stage and ascertain if DPH data standards are being met. An action plan will be developed during the review process to achieve compliance, if feasible, of the identified databases.
2. Houses the annual review of the databases in the Population Health Statistics and Surveillance Section. This Section is the most appropriate location for the continuous quality improvement of the DPH databases given its concentration of knowledge on the sociodemographic data collection policy and vital statistics databases.
3. Forms a Data Quality Committee comprised of members from different sections throughout the agency such as: Tumor Registry, Vital Records, Infectious Disease, Chronic Disease, Regulatory Services, Health Care Licensing, Office of Healthcare Access, Office of the Health Information Technology (HIT) Coordinator, and the Office of Multicultural Health. This committee will assure the consistency of the DPH data collection policy especially with the goal of advancing the elimination of health disparities. The committee will also take on review of other data quality improvement initiatives on an ongoing basis to make sure the changes are sustained over time.
4. Assigns a designated DPH employee to be the lead and the co-chair for the Data Quality Committee along with the Population Health Statistics and Surveillance section chief.
5. Supports the passage of the legislation in the form of (a) a Public Act which mandates that all state health and human service agencies conform to the federal standards for collection of race, ethnicity , primary language, and disability status, and/or as (b) part of the DPH Administrative Regulations for collecting required data elements on state-issued forms. This would include forms for physician reporting of notifiable diseases, reporting of laboratory findings, the traumatic brain injury registry, and data collected by the Office of Health Care Access (OHCA) on outpatient events and inpatient discharge abstract and billing data.
6. Educates and trains DPH data collectors, users, and managers on the DPH data standards outlined in the DPH data collection policy. A data policy training project is proposed and will be submitted as part of the FFY2013 U.S. Preventive Health and Health Services Block Grant. If the grant award comes through, a web-based self-directed staff training module will be developed to address the interrelationships of accurate data collection on sociodemographic characteristics, health outcomes, and health inequalities.
7. Supports the standardization of reporting forms submitted from different settings, such as labs (e.g. for adult lead poisoning), hospitals, physician offices, etc., and discourages the use of custom forms created by different reporting facilities which may or may not include the required data.
8. Provides an appropriate amount of money and resources to DPH to fund the changes to the databases or requires that each program build-in the funds needed for updating/upgrading the databases (as a whole) into grant requests.