

Re-envisioning and Revitalizing the Health and Human Services (HHS) Data Council:

Implementing Changes to the Goals, Work,
and Charter of the Data Council

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Federal Committee on Statistical Methodology

October 22, 2024

Data Council Founding

- 1994 - HHS created a department-wide information policy committee that handles cross-cutting data and privacy issues.
- 1995 – The Secretary of HHS created the Data Council to continue cross-cutting work related to data privacy and policy.



Data Council's Chartered Responsibilities

Develop Department-wide data collection strategy, including coordinating and consolidation of surveys

Oversee surveys and general statistical analysis

Work with HHS programs and policy makers, NCVHS (the federal advisory committee), research community, states, private sector, and others, so that data collected by HHS meets the need of all users and be easily accessible.

Serve as HHS's liaison and contact for the NCVHS over time. Ask for issue-specific reports from NCVHS, monitor the work of the NCVHS, make recommendations regarding NCVHS membership, and re-chartering

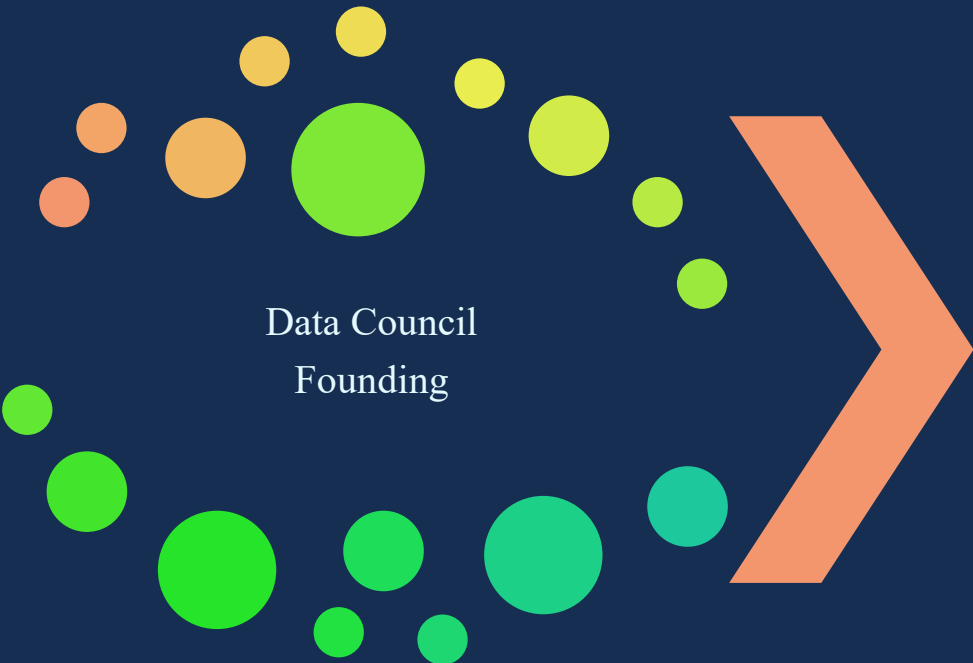
Respond to data standards and privacy issues presented by the NCVHS and others

Work toward consensus in data standards and privacy

Implement the Vice President's charge to lead an interagency effort in four areas of information system policy: data standards, privacy, telemedicine, and enhanced health information for customers.

Original Membership

Every HHS
Assistant Secretary
and Agency
Administrator



Passage of Evidence Based
Policymaking Act of 2018
+
Changing healthcare and human service
priorities and challenges
+
New HHS groups – Data Governance
Board, Evidence and Evaluation
Council, AI Community of Practice, etc.



Current Data Council

Monthly meetings

- Co-chaired ASPE and NCHS
- Updates from Statistical Officer, Evaluation Officer, Chief Data Officer
- Speaker(s) on Data Topic

Working groups (1-2 year cycle)

- Data Modernization
- Categorization of Multiple Categories
- Administrative Data – Record Linkage



Re-Envisioning

Given new HHS needs and governing bodies, how can the HHS Data Council be most useful?

Steps in Re-Envision

- Survey of Membership
 - Demographics, Work, Needs, Interest, Ideas for Data Council, and Modalities.
 - Open and Closed ended
- Data Walk with Findings
 - Large Group Summary
 - Small Groups Discussion
- Key Informant Interviews
 - 7 interviews
- Analysis of all survey data, data walk, and interviews
- Presentation of findings and proposal for new vision
- Next steps



Member Demographics

Survey of listserv ~200 members

49 responses

Job Title

Social Science Research Analyst
Analyst Analysis Office

Program **Director** Branch Chief

Senior Advisor Research Lead Senior Health Scientist
Statistician Director Data



Position Level

- 55% GS-15+
- 88% GS-14+

- n=42

Level	Percentage
GS-12	2%
GS-13	10%
GS-14	33%
GS-15	48%
SES or equivalent	7%

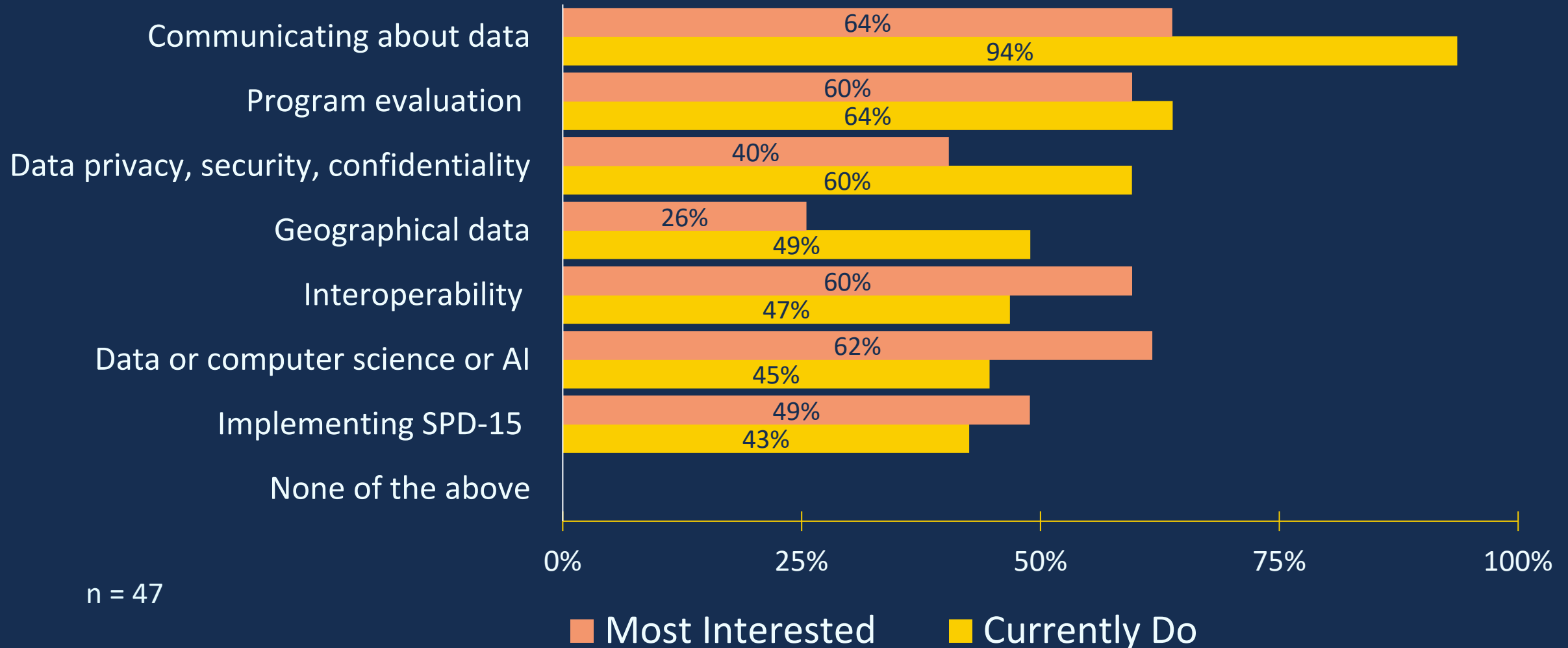
Years working in data analysis, policy, evaluation, evidence building, or a related field

Mean=19
Median=16
Mode=15
87% with 10+ years
67% with 15+ years

- n=46

Years	Number	Percent
1-4	1	2%
5-9	5	11%
10-14	9	20%
15-19	11	24%
20-24	8	17%
25-29	5	11%
30-34	4	9%
35+	3	7%

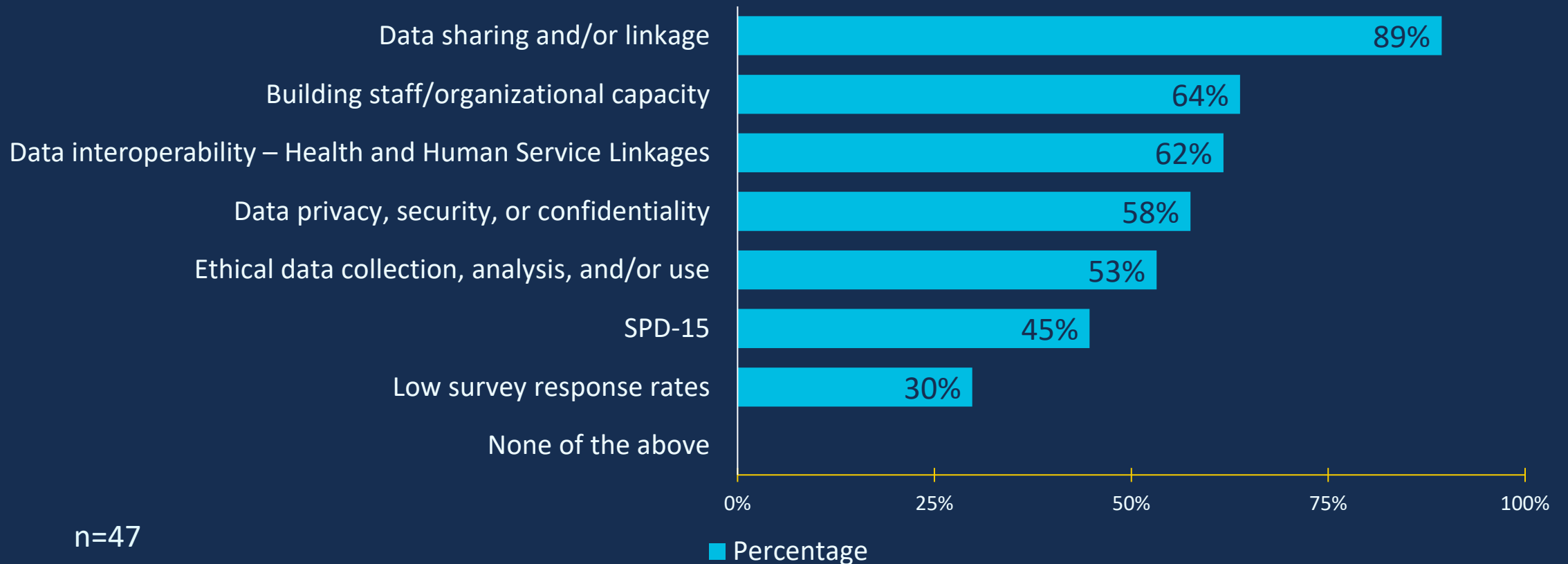
Which of the following do you currently do? are you most interested in?



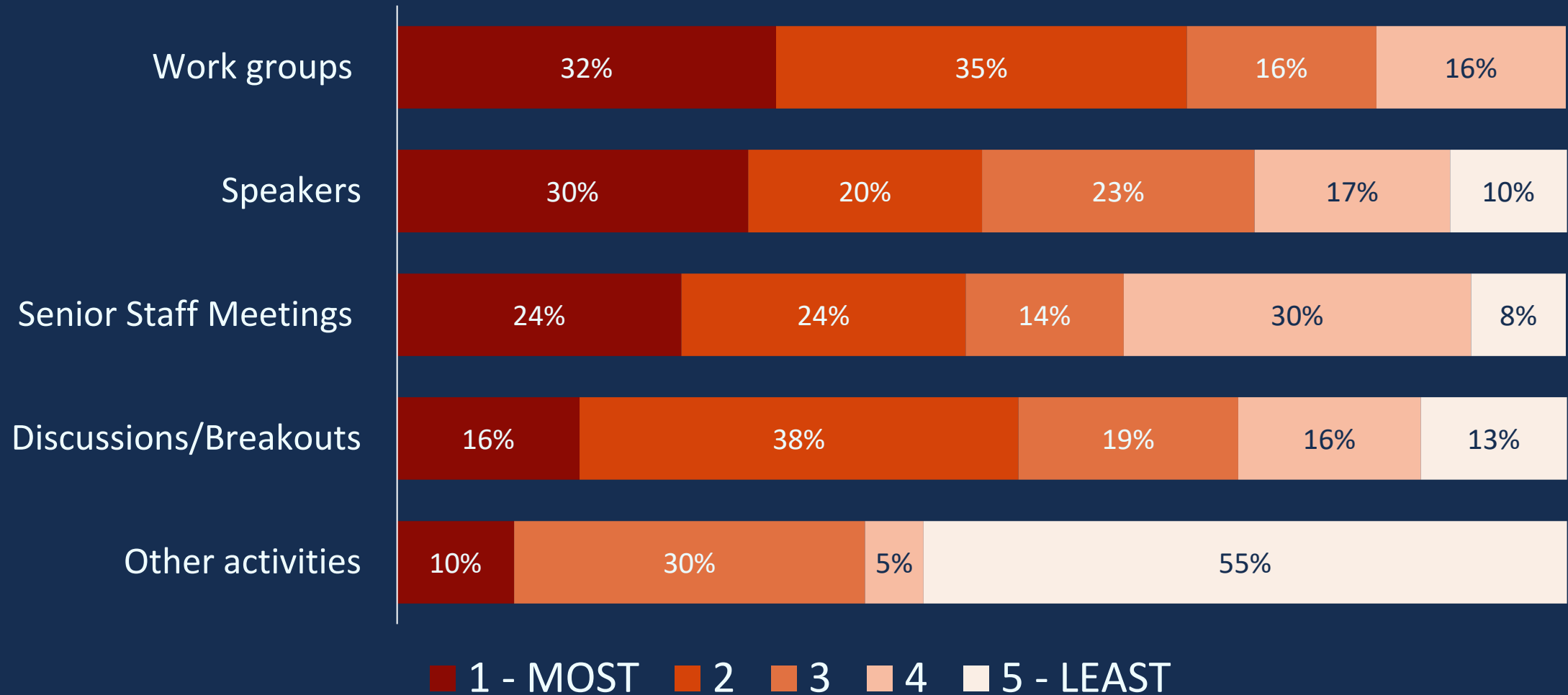
n = 47

Which of the following topics are most relevant to your work?

Percentage



Ranking of Most Beneficial Modality



Summary of Data Walk

- 1. Strengthen governance and leadership: Establish clear roles and structures within the council to enhance decision-making processes and accountability, and to provide active guidance in fulfilling the council's mission.
- 2. Ensure clarity of purpose and relevance: Regularly revisit and align the council's purpose with the current needs and challenges of the organization, ensuring that the council's focus remains relevant.
- 3. Enhance collaboration and communication: Foster stronger collaboration with other data-related groups within the organization, while improving internal and external communication mechanisms.
- 4. Balance data sharing and privacy: While promoting data sharing, the council should also prioritize data privacy and work towards finding an optimal balance between the two.
- 5. Leverage technology and innovation: Utilize AI and other advanced technologies for efficient data analysis and encourage a culture of innovation within the council.
- 6. Adopt an advisory role and continuously adapt: The council should take on a proactive advisory role in shaping data-related policies and initiatives, while continuously reviewing and adapting its practices in response to changes in the data landscape.

Key Informant Interviews

- 7 interviews
 - Your experiences with the Data Council
 - DC's biggest accomplishments
 - DC changes in the past 10 years
 - How DC could be improved
 - How DC can serve HHS leadership
 - How DC can serve its members
 - How DC should collaborate/coordinate/work with other Federal Groups or Communities of Practice
 - Other thoughts on the DC

Key informant interview summary

- Balance Serving Members and Serving HHS
- “Council of Councils” with Data Council and Groups created by Evidence Act
 - Plan work for next several months.
 - Common work as appropriate
- Communicate/Disseminate Data Council Information outside of Data Council Members

Summary of findings



Different data landscape than when the Data Council started



Need more structure and tighter connection to Department and Agency work



Information should be better disseminated outside of meetings



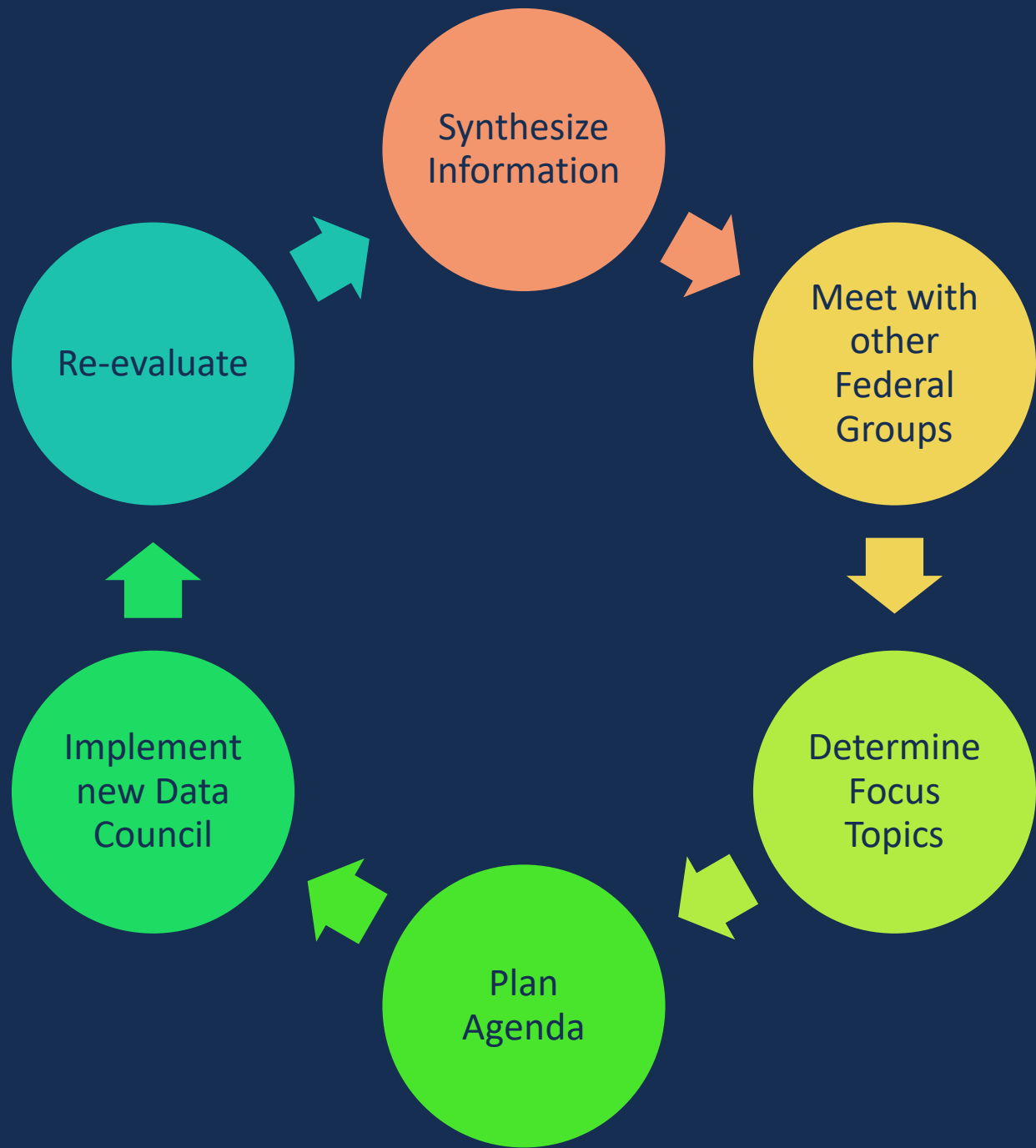
Value opportunity to collaborate with HHS colleagues – more is needed



Generally Positive Sentiment



Next Steps



Upcoming Re-envisioning Activities



November Data Council will have second planning call



January 2025

launch re-envisioned Data Council with continual iterations



Rewrite the Data Council in light of Evidence Act and resulting changes to Data Council

Questions

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