

---

## FHCQ | Social Needs and Health Equity Steering Committee

Storing and Sharing Data Workgroup

May 9<sup>th</sup>, 2023 | 8:00 – 9:00 a.m.

Virtual

---

### MEMBERS PRESENT

---

Kate Cross, MHA, Washington State  
Department of Health

Dwayne Taylor, One Health Port  
Ryan Williams, MBA, Molina Healthcare

### STAFF AND MEMBERS OF THE PUBLIC

---

Nicholas Locke, MPH, Bree Collaborative  
Karie Nicholas, MSc, Bree Collaborative  
Emily Robson, DNP, RN, Bree Collaborative  
Ginny Weir, MPH, Bree Collaborative

### WELCOME

---

Nicholas Locke, Bree Collaborative, welcomed the group to the Storing and Sharing Data workgroup, an ad-hoc workgroup of the Social Needs and Health Equity Steering Committee. Emily Robson, DNP, RN, introduced herself and her work with implementation, introducing next steps for the social need and health equity work.

### DISCUSS: COMMENTS ON DRAFT RECOMMENDATIONS

---

Mr. Locke shared the progress of the FHCQ's outreach to subject matter experts and other associations in Washington state. Unfortunately, given the turnaround time between the last meeting, few organizations were able to provide feedback. The FHCQ did receive some high-level feedback on the structure and goals of the recommendations, one set of direct comments on recommendations, as well as comments from recent presentations. Workgroup members walked through the comments.

- Sex Assigned at Birth (SAB): our recommendations currently say ONLY healthcare facilities should collect this data. We may want to be more broad about who might need to collect SAB. The workgroup had a similar conversation about disability data and who should collect.
  - The workgroup aligned on introducing a phrase from HIPAA – collect the “minimum data necessary to identify and meet needs.” This phrase will be added to the top of the standards section.
  - Other comments on data best practices for sociodemographic standards: allow people to indicate multiple race/ethnicities instead of grouping into a single “multiethnic” category. We would like to see more clarity on the terms “race” vs “ethnicity.”
- We received comments about WSR 22-13-187, a data collection rule for inpatient hospitals about the DOH CHARS dataset. The data requirements are very expansive.
  - Members discussed the goals of this data standard, with the understanding that it is a smaller subset of organizations that are using this standard.
  - The SOGI data fields are not very well defined, and the workgroup will not move to endorse these standards.
  - The workgroup would like to find out more information about the SOGI data in particular.
- MPI: We recommend a master patient/person index. Can we be more clear about who will need to create this (individual organizations vs. a centralized organization)

- We likely need a centralized MPI if we want the data to be aggregated.
- Options could include vendors in specific areas that can align on a standard or a state-wide development.
- “Referential matching” was added to the MPI capability.
- Ethics: do we want to add more context around the ethical considerations, for example a definition for data autonomy?
  - We should be more specific and define each word, looking to existing definitions, mostly from research settings.
  - We should include definitions on data autonomy, data sovereignty, and transparency.

#### **DISCUSS: NEXT STEPS**

---

Mr. Locke informed members of next steps.

- The final draft recommendations will be edited with the comments from this meeting.
- The final recommendations will be presented at the SNHE Steering Committee meeting on June 26<sup>th</sup>.
- We will move to implementation work from now through the end of the year.

#### **PUBLIC COMMENT AND GOOD OF THE ORDER**

---

Mr. Locke thanked workgroup members for attending and discussed next steps. The workgroup will not plan on meeting again, instead we will move to an implementation process through the end of 2023. Members are invited to join the implementation Steering Committee.