

Oregon Technical Advisory Group Semi-Annual Meeting, November 8, 2011

EPHT Team

Jae Douglas, Principal Investigator
Curtis Cude, Program Manager
Courtney Sullivan, IT Project Manager
Dan Rubado, Epidemiologist
Mary Dinsdale, Senior Research Analyst
Tara Chetock, Public Health Educator
Marina Counter, Research Analyst (not in attendance)
Eric Main, Research Analyst
Karen Worden, Administrative Support

Attendees

Ken Rosenberg, OFH
Richard Leman, ODPE
Gil Wistar, DEQ
Jenn Bildersee, Portland BF Program
Don Austin, OHSU
Dave Leland, OEPH Drinking Water Program

GoTo Meeting

Christine Svetkovich, DEQ
Vivan Siu, PSU Population Research Center
Toby Harris, Washington County Public Health
Jon Ostar, OPAL

PI Update: Jae Douglas

1. The EPHT program was awarded a new 3 year Cooperative Agreement that began in August 2011.
2. EPHT will be working with the Office of Family Health (OFH) to get the Birth Anomalies Registry up and going. The Child Health Development Resource Center at OHSU will be working in collaboration with us on this project.
3. The National EPHT Conference was held in September. Funding issues were discussed. It was emphasized that funded states need to demonstrate their contribution to the portals at the state, national levels as well as to the portal itself. The Tracking Network continues to expand on existing indicators (e.g., adding annual blood lead levels to the lead indicator) and add new indicators (e.g., climate change and hospitalizations and mortality due to extreme heat events)
4. Our push at Oregon EPHT is to update existing datasets and add new data (e.g., demographics, environmental justice and community design).

Q: Has there been any discussion at the national level on the Keystone Pipeline and its effects on atmospheric carbon dioxide.

A: No. This is a great option for Health Impact Assessment (HIA). There are four major program areas in Research & Education other than EPHT (i.e., Healthy Homes & Schools, Healthy Workplaces, Healthy Waters and Healthy Communities) and there are lots of roadways between

these. EPHT is not a program in the same sense; it is a resource that can collaborate with the programs.

Emerging Indicators - Developmental Disabilities: Curtis Cude

The CDC Tracking Branch was directed to address certain data needs, including developmental disabilities. CDC intends to release this on their portal in December 2010. Data sources include Department of Education "Individuals with Disabilities Education Act" data as well as CDC Autism Network data.

Q: Can we change the terminology "developmental disabilities"?

A: CDC determines the terminology. Terminology changes how children are classified, and the intent is to improve acceptance and destigmatization of developmental disabilities.

Q: What about including indicators for environmental exposures leading to congenitally caused developmental disabilities?

A: These are the disabilities that CDC is focusing upon in the present time. This was mentioned by Pew Commission on the rise in numbers of developmental disabilities. There has been interaction between genetics, social factors and developmental disabilities.

Q: The CDC and the states differ in structure. How does that affect this particular discussion?

A: The CDC is developing indicators for the National Portal that differs from our state indicators. We have OR specific data (community design module) that we don't report nationally. The CDC has climate change and developmental disability modules.

Data Portal Update - Courtney Sullivan

1. The next 12 months will be focused upon the broad-scale development on the data portal.
2. Secure portal was the last release with access to non-suppressed measures.
3. The next phase will be the data portal navigation and map module re-design
4. Jan 2012 is the target due date for the redesign of map interactivity and data for display on the map module.
5. The next phase is to update all current data sets and include a topic area on demographics including environmental justice indicators and a demographic map overlay. We'll round out the 2012 year by completing the community design topic area and enhancing data availability to the secure data portal.
6. New datasets over the next 12 months depends upon what the workgroups can agree on. Climate Change and Harmful Algae Blooms are closest to being ready.
7. The Graph module will be redesigned to allow more interactivity

Data Portal Navigation Redesign – Mary Dinsdale

We are creating the portal to be more easily expandable in a way that is logical. The purpose of this demonstration is to clarify this new structure and to display data that is simple to get and simple to use.

New Indicators and New Data

Q: Would you want to add death data?

A: We can add deaths and possibly emergency department data in the future. MI and asthma deaths will likely become NCDMs coming down from the national workgroup. We may be able to capture prevalence and other types of office visits with the new all payer / all claims database that is currently being set up by the Office of Health Policy and Research.

Q: Can you add DMAP data?

A: New data sets that could be added include: all payers/all claims which will include Medicaid; all reimbursed visits; emergency; outpatient; and prescription drugs. Self-pay and Medicare are not included.

Q: You have listed air and water, but not soil. Is there a reason why it is not a data development for the environment?

A: We have the framework for air, water, land. We don't have the indicators for soil yet. Soil exposure pathways are not as obvious as air and water. Determinations have to be made, regarding the media it is in, how it is getting to people, and what the health impact is. This level of granularity is what we are measuring in water and air. One indicator we would like to see developed is a risk indicator for hazardous waste sites. Then we could explore the combined risk of sites to adjacent residential areas. This would be more useful than a simple count of hazardous waste sites in an area, because some sites are more hazardous than others.

Q: In regard to the EPHT queries, do we suppress 5, 10, and 15 year summaries?

A: Currently, we do suppress this data but we're exploring options to relax suppression on summaries so that more data can be made available. *Note: Following this OTAG meeting, EPHT met with data stewards and program partners and determined that suppression on summary values could be relaxed in two ways. First, the denominators could be calculated as the sum, rather than the mean, of denominators for the summary period. This would increase the denominator for the summary period and reduce the amount of primary suppression. Second, while primary suppression of summary values is still necessary, complementary suppression is not necessary unless only one summary value is primarily suppressed. This will almost eliminate summary values being complementarily suppressed.*

Environmental Justice Indicators – Dan Rubado

1. New demographic indicators and additional mapping functionality for population characteristics and vulnerable populations are targeted to be online next year. There will also be new indicators and additional mapping functionality.
2. Current map display upgrade involves demographic data and adding interactive functionality; one being to overlay demographic indicators on top of the environmental and health data to explore environmental justice issues.
3. One meeting participant expressed concern about the use of the color yellow in the demographic mapping, stating that the shades of yellow are not easily defined in the map, and some users may not be able to discern certain specific colors such as red, yellow or blue.

Q: Is there a census of homeless people available?

A: Not available across the state. This has been done in Multnomah County but not other counties in Oregon.

Q: Is data available on findings from hazardous waste sites such as Brownfields, and Superfund sites?

A: Per Jon Ostar, OPAL – DEQ processes 17 air toxics on their website. EPA has its toxic release and superfund site inventories which we hope to use in the future. However, we need a good, consistent method for classifying sites since they are not created equal and pose different health risks based on the type of chemicals present, how they are released and how much is released.

Q: Is low literacy level listed as an indicator measure?

A: We have an indicator of education level, high school, college, etc., but we don't have any information on literacy level.

Q: What is the source of literacy rates that are being reported?

A: Perhaps school district data? This could be used as an Environmental Justice vulnerability measure in regard to literacy and English literacy.

Closing Remarks/Discussion

1. PSU has good data sources and geologic information.
2. Tax revenue information may be a good source for tobacco tax by geographic area, and alcohol by area.
3. Potential to recruit graduate students within the Master of Public Health or environmental programs. This could be used as a thesis for internships or a degree. They benefit from our advice, we benefit from their assistance.
4. Give seminars or presentation to local universities.