Metropolitan Washington Council of Governments
Health Officials Committee
March 2015

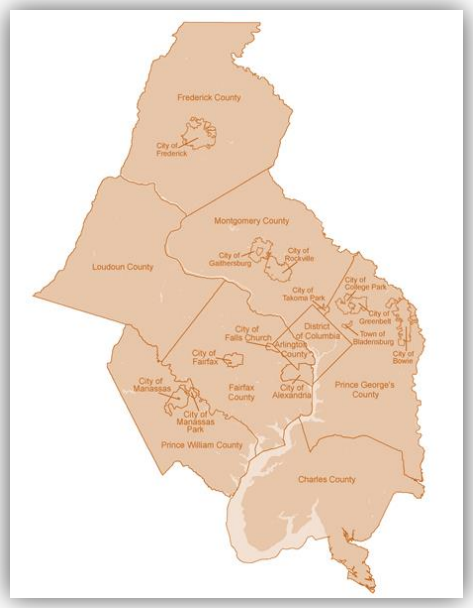
Health Indicators

Region Forward Research Opportunity

I. Introduction

The Metropolitan Washington Council of Governments (COG) Health Officials Committee (HOC) has a research opportunity that will assist in the effort of identifying types of available health data and performing analyses to assess health indicators for the populations within the National Capital Region (NCR). These health indicators will ultimately be used to identify information regarding the population at large, as well as within various population subgroups, to identify disparities and possible strategic solutions to improve the health of all communities served. This information may be used at a local or regional scale.

COG is an independent, nonprofit association that brings area leaders together to address major regional issues in the District of Columbia, suburban Maryland and Northern Virginia. The Health Officials Committee (HOC) is devoted to supporting the COG *Region Forward Vision* to advance the broader understanding of public health issues and helps meet the public health needs of member local governments and their residents within the following jurisdictions:



- District of Columbia
- Charles County, Maryland
- Frederick County, Maryland
- Montgomery County, Maryland
- Prince George's County, Maryland
- Alexandria City, Virginia
- Arlington County, Virginia
- Fairfax County, Virginia
- Loudoun County, Virginia
- Prince William County, Virginia

The Health Officials are looking to use collaborative approaches to improve population health by embedding health considerations into decision-making processes across a broad array of sectors. Health must be a consideration for all policies. In order to effectively change policy, health indicator data is essential as a baseline, to direct resources, and to measure progress.

REGION FORWARD - HEALTH GOALS – UPDATED JANUARY 2015

Health Goal: ***We seek communities in which every person enjoys health & well-being.***

Proposed Target: ***All residents, including subgroups, enjoy continuous improvement in the quality and duration of their lives.***

Health Indicators:
- ***Life Expectancy***
- ***Years of Potential Life Lost***
- ***Number of Poor Physical Health Days***
- ***Number of Poor Mental Health Days***

II. Problem Statement

Health indicators are calculated through several different methods utilizing various data collection strategies. The goal of this research is to determine the best methods for accurately and effectively calculating the health of the population over time.

If the best data is not currently available, this research will explain how we can obtain the optimal data required for the proposed approach. The health indicators will need to be easily communicated to wide range of populations including elected officials, the public, and subgroup communities.

Research Must Include the Following Health Indicators:

- ☐ **Measure(s) of Duration of Life, for example**
  - **Life Expectancy**
  - **Years of Potential Life Lost (YPLL)**
  - **Other suitable measures that the researchers propose**
- ☐ **Measure(s) of Quality of Life, for example**
  - **Number of Poor Mental Health Days**
  - **Number of Poor Physical Health Days**
  - **Other suitable measures that the researchers propose**

III. Research Objectives

1. **HEALTH INDICATOR RESEARCH & COMPARATIVE ANALYSIS:**
   Determine the most accurate and effective method of calculating each of the health indicators listed within the Problem Statement above. Determine what data is needed to support the analysis accordingly.

   A. Health Indicator Research *(Perform literature review & research on the following)*
   - ☐ Health Indicator Theory, Background, & Applicability
     i. *What are health indicators?*
     ii. *How are they measured?*
     iii. *How/why are they utilized?*
     iv. *How do they differ from each other?*
     v. *What are the strengths/weaknesses of each health indicator?*
     vi. *Are there additional health indicators that should be addressed in this research?*
   - ☐ National Best Practices Including *(but not limited to)* the Following:
     i. *Centers for Disease Control & Prevention*
     ii. *Seattle & King County Public Health*
     iii. *New York Public Health*
     iv. *Kansas Public Health*
   - ☐ Methods used in local and state HOC jurisdictions including COG 2009 report.

   B. Comparative Analysis *(Compare methods in 1.A. using the following considerations)*
   - ☐ Method Used: The method each agency uses.
   - ☐ Dataset Used: The dataset each agency uses to perform calculations.
   - ☐ Applicability: Method can be applied to different geographical/demographical levels of analysis.
   - ☐ Accuracy: The health indicator accurately reflects the population.
   - ☐ Time & Effort: The estimated time and effort required to perform the calculations/analysis effectively.
   - ☐ Comprehensible: The ability to describe the method and resulting health indicator to diverse audiences.
   - ☐ Strengths/Weaknesses: overall strength and weakness of each method utilized.

   C. Preferred Method & Justification *(Justification of preferred method for each indicator)*
   - ☐ Method Strength/Opportunity
   - ☐ Method Barrier/Challenge
   - ☐ Final Justification & Rationale for HOC Implementation

2. APPLICATION OF METHODS:

Apply the preferred methods determined in step 1 above to each local/state jurisdiction represented in the Health Officials Committee. Determine what data is and is not available to support the analysis accordingly.

A. Method Application *(Perform the following for each local/state HOC jurisdiction & Region)*

- ☐ Acquire Datasets to Support Health Indicator Calculations
- ☐ Perform Health Indicator Calculations for Jurisdictions & HOC Region

B. Health Indicator Data Analysis *(Analysis of results with the following considerations)*

- ☐ Data: Description of the datasets used and any data gaps.
- ☐ Multi-Level Data: Ability to stratify datasets geographically (i.e., regional, jurisdictional, zip code, neighborhood levels) and demographically (i.e., age, sex, gender, race, income).
- ☐ Sustainable: Ability for dataset to be reproduced over time.
- ☐ Accuracy: The health indicator accurately reflects the population within each of the HOC Jurisdictions.
- ☐ Barriers/Challenges: Any barriers/challenges for receiving the data and performing the calculations accurately/effectively (i.e., working across three sovereign state entities)
- ☐ Strengths/Opportunities: Proposed recommendations on how to eliminate barriers and challenges discussed above.

3. REPORT FINDINGS:

Based on the health indicator research and the method application, develop a final report based on the findings, recommendations, and opportunities going forward.

Research Paper

A. Health Indicator Research & Comparative Analysis

- ☐ Theory & Best Practices
- ☐ Comparative Analysis
- ☐ Method & Justification

B. Application of Methods

- ☐ Method Application
- ☐ Health Indicator Data Analysis

C. Conclusion

- ☐ Recommendations:
  - i. *What methods should be use to accurately & effectively measure the health of the population over time?*
  - ii. *How often should data be updated (i.e., annually, biannually, every 5 years?)*
  - iii. *How should this data be used to make effective enhance health policy?*
  - iv. *How can HOC strengthen health indicator measurement over time?*
- ☐ Limitations: Provide the limitations to determining the health of the population over time using the proposed methods. List the potential confounding variables that would affect the accuracy of the health indicator data (i.e., immigration/migration, age of population, etc.)
- ☐ Opportunities: Provide opportunities for future research going forward.

D. Export Data Files

- ☐ Provide health indicator data that was found for the region. Be able to export complete datasets with the final report along with any associated charts, tables, and/or maps.

Final Presentation

E. **Presentation Requirements**

- ☐ Location: Metropolitan Washington Council of Governments
- ☐ Audience: COG Health Officials Committee
- ☐ Length: 20 minute presentation, followed by 10 minutes for questions

IV. Proposed Timeline

Timeline Negotiable

Dates	Description of Work
March - May 2015	Disseminate Research Proposal Request
June 30, 2015	Finalist will be identified
July 1 – July 31, 2015	COG Planning Meeting(s)
December 1, 2015	Final report due
December 14, 2015	Presentation to HOC

V. Application Process

This opportunity is being extended to Schools of Public Health for their partnership with the Metropolitan Washington Council of Governments on important and impactful research.

Research Proposal Must Include the Following:

- ☐ **Research Background:** Experience with overseeing similar research projects
- ☐ **Student Engagement:** Description of which student groups being engaged
- ☐ **Proposed Implementation Plan:** Strategy for successful implementation
- ☐ **Timeline:** Proposed project timeline
- ☐ **Proposal Length:** Proposal may not exceed 3 pages of narrative

If you would like to apply, please submit a research proposal to Jennifer Schitter, Principal Health Planner at the Metropolitan Washington Council of Governments by **5:00PM EST on May 1, 2015**.

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