



# MARYLAND Department of Health

## Sources for Needs Assessment Data

### Sources for Health Outcome Data and Some Social Determinant Data

#### Maryland Vital Statistics reports for birth and death data

Annual reports are available at <https://health.maryland.gov/vsa/Pages/reports.aspx>

The chart section at approximately pages 10 to 35 has user-friendly state-level information on a variety of health outcomes.

Jurisdiction-level population by race/ethnicity and age is presented in tables 1-3

Table 10 has a Statewide look at a variety of birth outcomes by race/ethnicity. Following tables present these by jurisdiction and race/ethnicity. Infant mortality by jurisdiction and race/ethnicity is presented in table 33.

Numbers of deaths from all causes by jurisdiction and race/ethnicity are presented in table 39 and crude (not age-adjusted) death rates are presented in table 39A. Crude and age-adjusted death rates by jurisdiction are presented in tables 49 and 50 respectively.

Because there are so many ways to cross-analyze deaths by specific causes, by race/ethnicity, and by jurisdiction, there isn't room for all these results in the printed reports. CDC WONDER provides an online tool for pulling this level of data.

#### CDC WONDER online data query portal

A data query tool for death data that can be searched by year, city/county, and race/ethnicity can be found at this website: <https://wonder.cdc.gov/cmfi-icd10.html>

After clicking "I agree" on the data use restriction requirements, a search definition tool opens where one can select the way information is displayed, the state and city/county, the years, the race/ethnicity, and the cause of death to be analyzed. Output comes in tables that can be exported or cut and paste into a spreadsheet, from which charts can be produced.

Someone with data experience can self-learn this rather quickly by trial and error. Others likely need some training to be able to use this tool.

## **Cigarette Restitution Fund cancer reports**

Annual reports on cancer incidence (new cases) and mortality (deaths) are produced by the Maryland Cigarette Restitution Fund (CRF) Program and are available at [https://phpa.health.maryland.gov/cancer/Pages/surv\\_data-reports.aspx#anch2](https://phpa.health.maryland.gov/cancer/Pages/surv_data-reports.aspx#anch2) These reports provide race by jurisdiction data for new cases and deaths for leading cancers targeted by efforts funded by the CRF program.

This site contains other cancer data, from cancer surveys and the cancer registry.

## **HSCRC hospital use data**

The Maryland Health Services Cost Review Commission (HSCRC, home page <https://hscrc.maryland.gov/Pages/default.aspx>) has responsibility for hospital rate setting, and pursuant to that role collects Hospital inpatient and outpatient utilization data (claims data). While most analysis performed by HSCRC tends to be financial analysis, the data can be requested by qualified data analysts to explore health care utilization questions, and the data are used for several of the metrics published annually on the Maryland State Health Improvement Process website (see below).

## **Behavioral Risk Factor Surveillance System survey**

The Behavioral Risk Factor Surveillance System survey (BRFSS) is conducted by telephone annually in all states and territories of the US. It is coordinated and funded by the Centers for Disease Control and Prevention (CDC) and administered by the states and territories. It is the primary source of state and county level data on health conditions, risk factors, and health behaviors (included health care access and use of screening services). Several on-line tools are available:

CDC Web-Enabled Analysis Tool (WEAT) <https://nccd.cdc.gov/weat/#/analysis> This tool permits the construction of 4-way cross-tabulations or logistic regression models of single or combined year data for individual states or combinations of states. Those with data experience can self-learn this rather quickly by trial and error. Others likely need some training to be able to use this tool.

Maryland BRFSS tool for years 1995 to 2014 <http://www.marylandbrfss.org/cgi-bin/broker.exe> This tool permits the construction of three-way cross-tabulations of single or combined year data for Maryland and for counties in Maryland (if the sample size is sufficient) for the years 1995 to 2014. This site also has analogous tools for the Maryland Cancer Surveys (MCS), the Maryland Youth Tobacco Surveys (YTS), and the Maryland Pregnancy Risk Assessment Monitoring System (PRAMS).

The one advantage of this site over the WEAT (since the recent addition of combining years on the WEAT site) is that it permits the construction of county-level analysis in some cases.

Maryland BRFSS tool for years 2015 and onward <https://ibis.health.maryland.gov/> This tool provides multi-way cross-tabulation of single year Maryland statewide and county-level data for the years 2015 and onward. It has the advantage over the other two tools of outputting age-adjusted or crude metrics. One disadvantage is that at present, it does not permit combining multiple years of data together (which is sometimes needed to get reportable county-level data).

Those with data experience can self-learn these tools rather quickly by trial and error. Others will likely need some training to be able to use these tools.

### **Youth Risk Behavior Survey**

The Maryland Youth Risk Behavior Survey (YRBS) is an on-site survey of students in Maryland middle and high schools, focusing on tobacco-use prevalence and other health-related behaviors among Maryland youth. Detailed statewide and county-level data tables for the years 2013, 2014 and 2016 can be found at <https://phpa.health.maryland.gov/ccdpc/Reports/Pages/YRBS-Main.aspx>

### **State Health Improvement Process website**

The Maryland State Health Improvement Process (SHIP) data website <http://ship.md.networkofcare.org/ph/ship.aspx> is a wealth of information on 39 health metrics broken down by race/ethnicity at the jurisdiction level for the years 2008 to 2017. Color coded bar charts by year and race/ethnicity are available for each of the 39 metrics, for each jurisdiction. The key to getting jurisdiction-specific data is to select the jurisdiction at the bottom of the main page (out of view unless one scrolls down) where it says "visit another SHIP jurisdiction". That opens a jurisdiction-specific page where all of the data is for that one jurisdiction.

### **American Community Survey (ACS) and American Fact Finder**

The American Community Survey is an annual survey that is conducted by the census bureau. The bureau describes the survey as "the premier source for detailed population and housing information about our nation." It can supply national, state, county, ZIP code equivalent (ZCTA) and census tract-level

information about demographics, income, education, health insurance, language, birthplace, and citizenship. These data can be accessed at American Fact Finder <https://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml> using the guided search or advance search options. After specifying desired characteristics (income, race, place), the site provides a list of stock tables that contain the kinds of information that were requested. It may require looking at several different tables to find the kind of data layout that is most suitable for your inquiry. The ACS does not generally contain health outcome data.

### **The Challenge of Finding Local Data**

Finding data at the local community level (areas smaller than city or county) can be difficult from most general surveillance systems since these systems may not have enough sampling from most communities to produce reportable results. Potential sources of this local data included:

#### **American Community Survey (ACS) and American Fact Finder**

This is described above, and due to its ability to provide ZIP-code equivalent (ZCTA) and census tract-level data, may be able to provide some local data.

#### **Local Hospital Community Benefit Reports**

Hospitals are required to submit Community Benefit Reports, which include local needs assessments. These reports may be a source of local needs assessment data that may have been collected by the hospital in the community.

#### **Local Health Department**

Local Health Departments are sometimes able to obtain funding to perform jurisdiction-specific surveys that may be designed to produce reportable data for areas smaller than the entire jurisdiction. If such surveys have been done, they may be able to provide useful local data.

# Sources for Finding Evidence-based Interventions

## The Guide to Community Preventive Services

The Guide to Community Preventive Services <https://www.thecommunityguide.org/> is perhaps the single most useful resource to finding evidence-based community-level interventions. It is self-described as “a collection of evidence-based findings of the Community Preventive Services Task Force (CPSTF). It is a resource to help you select interventions to improve health and prevent disease in your state, community, community organization, business, healthcare organization, or school.”

The Guide website has a drop down menu called “Topics” which opens up a list of 21 areas within which the CPSTF describes interventions and has evaluated their effectiveness.

## Condition-specific CDC web pages

The Center for Disease Control and Prevention (CDC) has webpages devoted to specific health conditions. These pages often also include discussions of evidence-based programs that can be implemented in communities. Examples include:

Heart Disease and Stroke Prevention: <https://www.cdc.gov/dhdsp/>

Million Hearts Program: <https://millionhearts.hhs.gov/>

Cancer Programs: <https://www.cdc.gov/cancer/dcpc/about/programs.htm>

Diabetes Programs: <https://www.cdc.gov/diabetes/programs/index.html>

Obesity Programs: <https://www.cdc.gov/obesity/strategies/index.html>

Asthma Programs: <https://www.cdc.gov/asthma/nacp.htm>

Tobacco Programs: <https://www.cdc.gov/tobacco/index.htm>

Arthritis Programs: <https://www.cdc.gov/arthritis/interventions/index.htm>

Chronic Disease Self-Management:

<https://www.selfmanagementresource.com/index.php/programs/small-group/chronic-disease-self-management/>

Infant Mortality Programs:

<https://www.cdc.gov/reproductivehealth/maternalinfanthealth/infantmortality-cdcdoin.htm>

## **Advocacy group web pages**

Various disease-specific advocacy groups have websites devoted to specific health conditions. These sites often also include discussions of evidence-based programs that can be implemented in communities. Examples include:

American Heart Association: <https://www.heart.org/en/professional/workplace-health>  
<https://www.heart.org/en/professional/educator>

American Cancer Society: <https://www.cancer.org/healthy.html>

American Lung Association: <https://www.lung.org/our-initiatives/>

American Diabetes Association: <http://www.diabetes.org/are-you-at-risk/>

Arthritis Foundation: <https://www.arthritis.org/living-with-arthritis/>

March of Dimes: <https://www.marchofdimes.org/mission/prematurity-campaign.aspx>  
<https://www.marchofdimes.org/materials/october-2018-prematurity-collaborative-newsletter.pdf>

## **Literature searches**

If your organization has the time and the experience, searching the medical literature directly can be a source of evidence-based interventions.