RETAIN Data Roundtable CoP Notes

Facilitator: Christina Jones, Data Scientist, AIR

Session 1: Kick Off of the Data Roundtable CoP

July 28, 2022

The first RETAIN Data CoP session kicked off with a brief welcome from the facilitator who led the group in introductions and then recapped the purpose of the Data Roundtable CoP, which is to share and learn from others in the following ways:

- connecting and building relationships with RETAIN state staff in data-centric roles,
- sharing best practices, challenges, and thought partnership specific to data,
- identifying new strategies to overcome challenges or enhance existing efforts, and
- receiving support and information relevant to your work.

Afterward, the CoP group engaged in a Jamboard session during which they shared ideas on norm setting and how to make it an inclusive environment of sharing.

Participants' Jamboard responses regarding norm setting included the following:
- Allow for participation in multiple ways.
- Listen to others' opinions regarding data and what they think the data mean.
- Embrace diverse perspectives.
- Assume positive intent/goodwill.
- Be present, participate, and be engaged.
- Commit to confidentiality.
- Share the collaboration of the data collection between partner, workforce, and medical systems alike.

Further Jamboard Discussion on Data Roundtable Topics

The facilitator welcomed participants to go on camera and talk more about what they would like to include as the data roundtable topics in the next couple of sessions. (These could include challenges or areas you wish to learn more about.)

- Tracking low-enrolling clinics
- Referral and/or participant tracking
- Tracking provider training
- Handling self-referrals
- Managing "nonstatic" contact information (how to keep up with the new data without getting rid of the old data and/or how to confirm if the old data are still needed.)
- Striking the balance between data and collection and undue burden on partners
- Data management systems across the states

  - Short demos of current systems

- Monitoring the lags in the participant experience
- Using data for CQI
- Evaluating provider training effectiveness
- Assessing stakeholder satisfaction
- Barriers encountered and solutions implemented (Narrative of how people do what they do and organic process to barrier and solution process.)
- Challenge: Consistency with manual data collection
- Talks about important data – how to have the tough talks (specifically work loss days and restricted workforce activities)
- Lots of challenges around nondata people entering data and not being consistent

  - A participant shared that their system is created in a way that the data enterer has limited access.
  - Another participant shared that open communication is needed with those who are entering the data, and their team does a very good job on this; on the design side, there is logic you can create to narrow things or preset pieces to reduce the burden of data entry; for those requesting that their return-to-work coordinators enter a lot of data, this process can save time/effort through logic and design.

- Pushback from healthcare re: HIPAA – accommodations of specific descriptions

  - A participant shared that their MIS system is not currently HIPAA required, so instead they have implemented a secure site to transfer information to/from to fill in the blanks of the manual tool they are collecting for the purposes of data collection. In partnership with one of their medical partners, they are also building out a REDCAP system to capture those specific medical elements, which will release the need to manually collect these data. The goal is to utilize the MIS system to collect workforce data and then the REDCAP system to collect the medical data

needed, with their specific point of contact marrying the data together to become the performance elements equal to Appendix A.

- The same participant also shared that they have created their own numbering conversation with some of the numbers in the medical system coupled with additional numbers to make it unique yet easily identical when new medical partners join. They are happy to share their numbering conventions with the group. Another participant shared a similar numbering convention approach used in their system.

- Nondisclosure of demographic data when individuals choose not to identify on race/gender etc.

Further Discussion on Priority Topics

The CoP group then drilled down on priority topics for the next session:
- Referral and/or participant tracking
- Tracking incentives and how they relate to the referral process
- What happens before enrollment – data tracking

Favorite Resources and Best Practices

The facilitator took the last 10 minutes to discuss resources and best practices, and participants were welcome to share among themselves.

- The facilitator reminded the group about the AIR resources and the individual state mapping exercises.
- Participants were welcomed to share their favorite resources and best practices with the group as well.
- One participant referenced a state resource that they will be happy to circulate.

Closeout
- Christina Jones will be in touch on scheduling with the participant who volunteered to demo.
- The topic will be set prior to the next meeting.
- Participants were encouraged to email Christina with any questions: cjones@air.org.