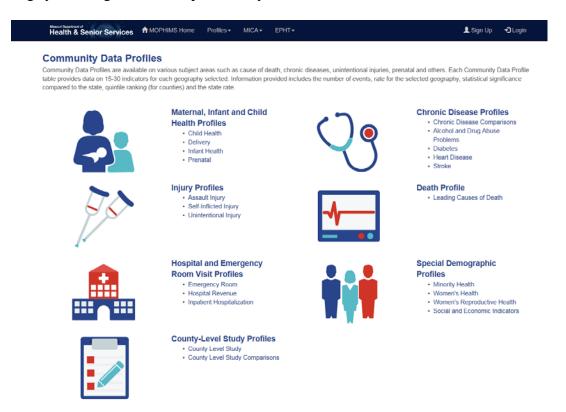
# **MOPHIMS User Group Newsletter**

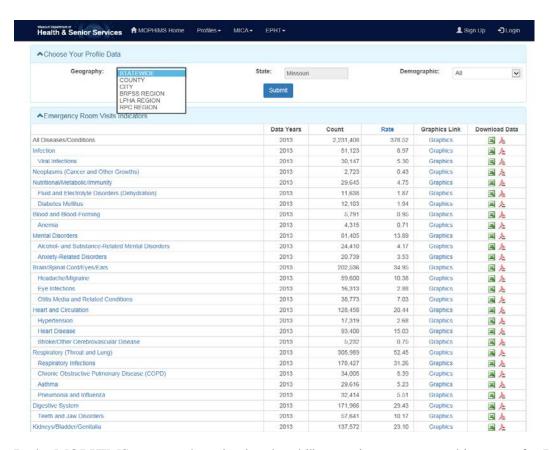
#### November 2017 Issue #17

#### **Profiles Launch**

As many of you have observed, the new Community Data Profiles made their debut this past summer. The entry page to the Profiles looks very similar to the new MICA page, with Profiles arranged by topic. The number of Profiles and the indicators included in each Profile should be largely unchanged from the previous system.



There are several notable differences with the new Profiles system. Once a Profile is selected, you now go to the state Profile for that topic. There is a drop down menu (shown in the screen shot below) which is near the top of the page that allows users to select other types of geographies. Using the **Emergency Room Visits Profile** as an example, users can choose among individual county profiles as well as select cities, BRFSS regions, LPHA regions, and RPC regions.

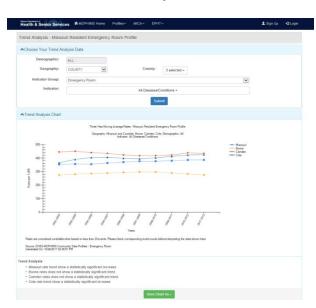


In the MOPHIMS system, there is also the ability to view a new graphics page for Profiles. Clicking on the **Graphics** hyperlink opens a new page with several different data visualization options. The screen capture below continues to use the **Emergency Room Visits Profile** and displays the **Graphics** page for the All Diseases/Conditions indicator for Cole County.

- Maps: The top row displays two county-based maps, one displaying significant difference comparing the county's rate to the state average, and the other showing quintile rankings.
- Dashboard Graphic/Fuel Gauge: The graphic on the far right portion of the top row is a new fuel gauge style graphic. The graphic divides the 115 counties into five quintiles, with the red line showing where the county-specific rate falls on the continuum from 1 to 115. The blue line then shows where the state rate would fall, which is generally (but not always) somewhere near the middle. The wording in the bottom middle of the fuel gauge is color coded to indicate whether the county is better or worse than the state depending on the positive or negative health outcomes associated with the indicator (neutral indicators are not assigned a color code for that section of the fuel gauge).
- Trend Line/Bar Charts: As was available in the old system, the bottom row on the graphics page includes a trend line and bar chart.



Users will notice each graphic on the page has a button labeled 'Full Version'. Each graphic has its own unique options for graphic customization that are worth exploring. All graphics have options for download into reports. With the trend line and bar chart, additional counties or regions can be added for increased context, as can multiple indicators. The image below shows the trend line for ER All Diseases/Conditions for Cole County with Boone and Camden counties added. Missouri is always included as reference data for trend lines and bar charts.



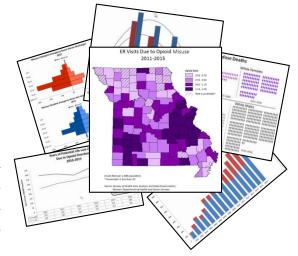
Hopefully everyone can find something fresh and useful with the new Profiles system. For a more thorough review of features found on the Profiles system, please check out our training schedule for when we might be coming to your part of the state. In the meantime, if you have questions or concerns about anything you find with the new system, get in touch with one of the BHCADD training team.

## Tracking Missouri's Opioid Problem

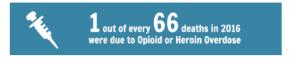
In September, the Missouri Opioids Dashboard (<a href="http://health.mo.gov/data/opioids/">http://health.mo.gov/data/opioids/</a>) premiered on the Department of Health and Senior Service's (DHSS) website. The dashboard serves as a quick reference tool for common opioid-related media and data requests. Maps, charts, tables,

and infographics summarize state- and county-level data for deaths and emergency room visits. Additional information addresses Years of Potential Life Lost (YPLL) for the state and nation, race and gender disparities, and costs related to ER visits. Data and graphics pertaining to Neonatal Abstinence Syndrome (NAS) was recently added.

Aggregate-level data comes via death certificates from Vital Records and ER and inpatient hospitalization data from the Patient Abstract System. The dashboard displays three types of opioid information: all opioids, heroin, and non-heroin opioids (which include



prescription drugs and illicit fentanyl and its analogs). Most of the data looks at the opioid epidemic's progression by year but some topics are available by quarter or by month. The Missouri Opioids Dashboard will serve as a useful tool to the media, public health decision makers, and the public. It will also be used to help disseminate findings from the data collected through DHSS's grant with the CDC for the enhanced surveillance of opioid-related morbidity and mortality. The Dashboard will be updated on a quarterly basis.

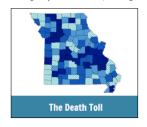




#### Missouri Opioids Dashboard

The data presented here are relevant to the opioid misuse epidemic in Missouri. These data tell a troubling story: the opioid epidemic affects all genders, all races, and many age groups in both rural and urban Missouri geographies. The impact is multi-dimensional and multi-generational. Trends indicate that the scourge of misuse in our state, and nationwide, continues to affect people across all demographics.

Clicking the images below will lead to detailed graphics and analysis that feature data from Missouri death certificates and Missouri hospital and emergency room records, among other sources.









Contact us for direct questions or more specific data requests.

## **Public Health Spotlights**

BHCADD is happy to announce two new members to our team, Tanner Turley and Teresia Karuga.

#### **Tanner Turley**

Tanner Turley received a Bachelor's in Statistics from the University of Missouri Columbia. During his studies Tanner focused on survey design and sampling procedures. He enjoys a good burger and recommends Black Sheep Burgers and Shakes in Springfield, MO and Broadway Brewery in Columbia, MO. Tanner has two guinea pigs, S'mores and Peaches, and while he likes them both he has an affinity towards S'mores for her inquisitive nature.



(ESOOS) project as a Research Analyst II.

Tanner began his professional career working for Anheuser-Busch in St. Louis, MO doing product forecasting. This involved monthly projections of products sold to Anheuser-Busch wholesalers. He then moved back to mid-Missouri where he worked for the Department of Economic Development as a Research Analyst I. BHCADD was lucky enough to win him over and in April of this year Tanner joined the Enhanced State Opioid Overdose Surveillance

In this position, Tanner would like to develop simple means by which to access opioid data in Missouri. He hopes to accomplish this by streamlining data accessibility and dissemination for public consumption. Tanner believes as long as individuals are "open to tailor implementation strategies based on [the data], it could be a real tool providing direction to policy makers with no preconceived notions on what could work." Tanner is eager to do his part in helping Missouri residents fight against this national epidemic.

#### Teresia Karuga

Teresia joins us from Ellis Fischel Cancer Center with the University of Missouri. She worked with the Cancer Registry department where she did hospital abstracting. Teresia is "super excited and a little nervous" about her new shared position between BVS (Bureau of Vital Statistics) and BHCADD. She feels there is a great deal to learn between the two units and hopes to gain knowledge from everyone around her. Teresia's long term educational goals include a possible PhD in Epidemiology and at some point would like to become an Epidemiologist herself.



Teresia obtained a Bachelor's in Health Science and a Master in Public Health with an emphasis in health promotion and policy from the University of Missouri Columbia. In graduate school she worked with refugee and immigration services in Columbia, Missouri. She worked with refugees with language barriers that may have been contributing to poor health outcomes. She helped to implement and promote the use of "blue phones" in hospital settings. Blue phones assist in finding representatives who speak in the patient's native tongue in order to facilitate the communication between physicians, nurses, other health professionals, and patients. Additionally, Teresia has spent two summers in Ghana working with a nongovernmental organization providing public health outreach and organizing workshops that educated communities on health issues such as HIV/AIDS.

Teresia is very family oriented. She and her husband recently had a little girl named Cecilia. This is their first born. Teresia stated being a mother is "quite an experience and I love it." She is amazed at watching how quickly Cecilia grows and learns. When asked what superpower she would have if she could have any, Teresia responded she would fly back to Kenya every day to see her family.

Welcome Teresia and Tanner, we are very happy to have you.

## **Data Updates**

The table below shows the most recent data year available for each MICA. Some of the MICAs are still a bit outdated and will be updated soon. Our users have been incredibly patient with our delayed update schedule, so we thought it might be interesting to share the process flow for MICA data before you see it on the MOPHIMS website.

When DHSS receives health data, it is put in the appropriate format uploaded to a development website, called devo. While in devo, it is reviewed by the IT analysts and MICA rock stars to ensure it meets all necessary standards and that the frequencies appear plausible. Once that is done, the data is forwarded to another test website, where the analysts once again check for data accuracy and quality, as well as verifying that the website features are functioning properly. Once that's complete, the data is uploaded to the production website, where it is made available to the public. Whew! We continue to update the health data every time it is made available to us.

	Year
Data MICA	(prod)
Birth MICA	2014
Cancer Incidence MICA	2013
Chronic Disease Death MICA	2014
Chronic Disease Emergency Room MICA	2014
Chronic Disease Inpatient Hospitalization MICA	2014
Death MICA	2015
Emergency Room MICA	2014
Fertility and Pregnancy Rate MICA	2014
Injury MICA	2014
Inpatient Hospitalizations MICA	2014
Mo Healthnet (Medicaid) MICA	2013
Population MICA	2015
Pregnancy MICA	2014
Preventable Hospitalizations MICA	2014
Procedures MICA	2013
Temporary Assistance for Needy Families (TANF) MICA	2012
WIC Child MICA	2015
WIC Infant MICA	2015
WIC Linked Prenatal-Postpartum MICA	2015
WIC Postpartum MICA	2015
WIC Prenatal MICA	2015

# **Upcoming MICA Trainings**

The following is the schedule for upcoming MICA trainings. The first courses have been scheduled and the training registration surveys for each location are available at <a href="http://health.mo.gov/data/mica/MICA/healthdatatraining.html">http://health.mo.gov/data/mica/MICA/healthdatatraining.html</a>. Draft agendas, older versions of course materials, and other details are also posted on this website.

	Course 1-	Course 2-
Location:	MOPHIMS: Introduction to Profiles and MICA	MOPHIMS: Health Data Analysis
MOTEC (Missouri Technical Training and Education Center) 1738 East Elm Street Jefferson City, MO 65101	December 13  Deadline:	December 14  Deadline:
	December 6	December 6
	Limit: 20 participants	Limit: 20 participants
St. Louis County	January 22	January 23
<b>Department of Health</b> 6121 N Hanley Rd Berkeley, MO 63134	Deadline:	Deadline:
berkeley, WO 03134	January 12	January 12
	Limit: 12 participants	Limit: 12 participants
St. Louis County	January 24	January 25
<b>Department of Health</b> 6121 N Hanley Rd Berkeley, MO 63134	Deadline:	Deadline:
berkeley, MO 03134	January 12	January 12
	Limit: 12 participants	Limit: 12 participants
Kansas City Health	February 7	February 8
<b>Department</b> 2400 Troost Avenue Kansas City, MO 64108	Deadline:	Deadline:
1Xa11505 City, 1410 04100	January 26	January 26
	Limit: 18 participants	Limit: 18 participants

We plan to offer trainings in the Central, Southeast, Southwest, and Northeast regions of the state beginning in April 2018. If you have a location that you'd like to nominate as a potential training site, please email Andy or Whitney.

We recommend attending these trainings even if you've taken the MICA courses previously. The MOPHIMS platform is chock full of special features and we want to make sure you have the knowledge necessary to take full advantage of the new system.

# **Recent/Upcoming Events**



It has been quite some time since we've published a

newsletter and the MOPHIMS training team has been very busy! In the past 9 months our team has given 9 presentations, exhibited at 8 conferences, taught 3 workshops, and traveled to 3 states!

One of our most high profile events occurred in June when Andy and Whitney traveled to Idaho so that Andy could present at the national Council for State

and Territorial Epidemiologists (CSTE) conference. His demonstration of the new MOPHIMS system was extremely well received and we brought home some great ideas. We saw several encouraging and familiar faces in the crowd! Fun fact: Did you know that locals pronounce Boise boi-see and not boi-zee?





## Q & A

My saved URLs for **Birth MICA** and **Population MICA** are no longer working. Why am I having trouble accessing these MICAs?

We have had multiple inquiries from users who have noticed MICA links (previously housed on) the old Data & Statistics page not working. Since the majority of the MICAs and all of the Profiles have been relocated to the new MOPHIMS site it is possible users may need to update their saved URLs for specific MICAs and Profiles. We know we're in your Favorites! Below is an explanation of why some Favorites may still be working, why some may not, and how to address the issue.

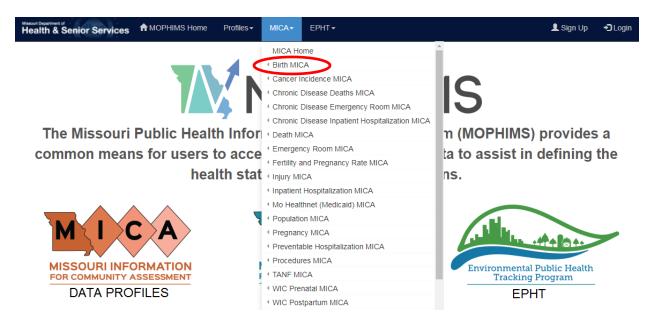
The MODHSS Data & Statistics page can still be used as a portal to access Profiles, MICAs, etc. and this URL (if saved) should still be working.

http://health.mo.gov/data/index.php

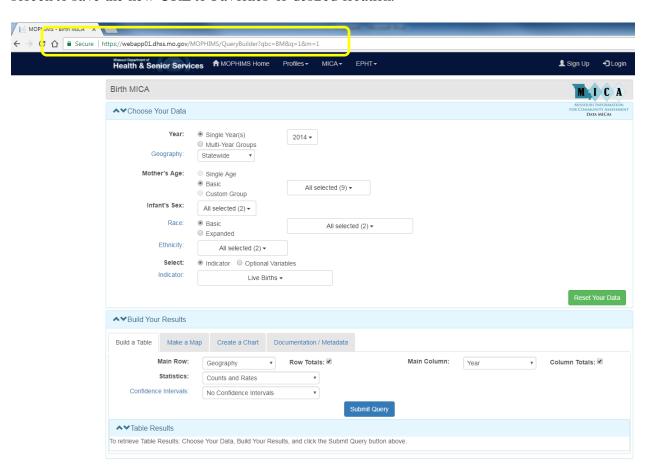


However, if a user is trying to access a *specific* MICA, such as **Birth MICA**, the link will need to be updated to the new **Birth MICA** located on the MOPHIMS site. This can be done by clicking on the MICA link on the Data & Statistics page (highlighted in red in the screen shot above) or by accessing the MOPHIMS site directly through the following URL: <a href="https://webapp01.dhss.mo.gov/MOPHIMS/MOPHIMSHome">https://webapp01.dhss.mo.gov/MOPHIMS/MOPHIMSHome</a>.

From the MOPHIMS site a user can select for the desired MICA, such as **Birth MICA**.



Once the user has navigated to their desired MICA the user can use the URL at the top of the screen to save the new URL to Favorites or desired location.



This same process may be used for accessing the Community Data Profiles. Please note, currently the **Priorities MICA** can still be accessed from MODHSS Data & Statistics page. It is not yet housed on the MOPHIMS site. While **Priorities MICA** may appear in a slightly different format than before, it is still functioning properly. **Practice Exercises** Use Fertility and Pregnancy Rate MICA to create a significant difference map displaying 2014 fertility rates to answer the following questions. 1. In what area of the state is the largest cluster of counties with high rates? 2. How many counties have significantly low rates compared to the state? 3. Do any counties have unreliable fertility rates? 4. Turn the data table display option on and use the sort feature to determine the county with the highest and lowest fertility rates. Highest: Lowest: Visit <a href="http://health.mo.gov/data/mica/MICA/solutions.html">http://health.mo.gov/data/mica/MICA/solutions.html</a> to check the solution. Final Thoughts-MOPHIMS Launch and back to business as usual

The BHCADD team would like to thank all of you for your patience and support as we've transitioned from the old MICA and Profiles websites to the new MOPHIMS platform. It's not been the easiest road for you data rock stars- please know that we recognize that. Our team put a ton of hard work into building the best data query system we could for you, and all of the positive feedback we've received is extremely appreciated. It's a great reward since as I'm sure you can imagine, this process has been filled with ups and downs. That said- if there's anything you'd like to see in the new system or miss from the old system, please let us know! Our hope is that we can continue to grow MOPHIMS and expand its potential.

Beyond reaching this long awaited milestone and launching MOPHIMS, our training team is especially excited to be hitting the road again in 2018. We've certainly missed interacting with our friends in the field and can't wait to share MOPHIMS with you. The team has labored intensely to revise all of our training materials to capture the tidbits, quirks, and awesome features that come with the new platform. Keep an eye on your email- we'll be sending out more training announcements soon!

While we are so pleased to be getting back into the swing of things, it's slightly bittersweet as a member of our training team will soon be departing. Cassie Eickelmann, who many of you may remember from previous trainings and conference exhibits, is leaving Missouri for the more temperate climes of Florida. Though we will miss her greatly, our entire team would like to extend a hearty thank you to Cassie for her hard work and stellar attitude. We wish you all the best, Cassie!



(Trainers Whitney Coffey and Cassie Eickelmann get caught in a rare Missouri monsoon while exhibiting at the Rural Health Conference in August. Who knew it would be good practice for Cassie?)

# **About the MOPHIMS User Newsletter Group**

The MOPHIMS User Group Newsletter was created in response to user requests for communication on updates to the MICA system, descriptions of new features, additional practice exercises, announcements of training opportunities, and any other new information about data that might help them perform their jobs more efficiently.

Newsletters will be published on a semi-annual basis. If you have ideas for content, please send them to <a href="Mailto:Andrew.Hunter@health.mo.gov">Andrew.Hunter@health.mo.gov</a> or <a href="Whitney.Coffey@health.mo.gov">Whitney.Coffey@health.mo.gov</a>. We would especially like to feature stories describing your success at completing projects or obtaining grants using the MICA tools as well as interviews with public health professionals about your duties and how you use MICA to accomplish them.

Past issues are available at <a href="http://health.mo.gov/data/mica/MICA/newsletters.html">http://health.mo.gov/data/mica/MICA/newsletters.html</a>.

Contributors:

Andy Hunter, Whitney Coffey, Cassie Eickelmann, Kristina Johnson, and Teresia Karuga

# How to Sign Up or Opt Out

If you have enjoyed this newsletter, please feel free to share it with your colleagues and community partners. We encourage them to sign up for the MICA User Group by sending an email to <a href="MOPHIMSUserGroup@health.mo.gov">MOPHIMSUserGroup@health.mo.gov</a> with the subject line MOPHIMS User Group. This will let us know to send newsletters to them directly so they do not miss any information. Also, we may occasionally distribute time-sensitive information on topics such as training opportunities via e-mail if the newsletter is not scheduled for publication prior to a registration deadline. Finally, the MOPHIMS User Group list helps us track the types of organizations using the tools, which is one of our performance measures.

If you would like to opt out of the MOPHIMS User Group, please send an e-mail with Unsubscribe in the subject line to MOPHIMSUserGroup@health.mo.gov. PLEASE NOTE: Depending on your position title, you may still receive other types of e-mail messages from us. For example, we are requested to send training information to all LPHA Administrators, even if they have unsubscribed from the MOPHIMS User Group.

#### **Contact Information**

**MOPHIMS User Group** 

MOPHIMSUserGroup@health.mo.gov 573-751-6285

Andrew Hunter

Andrew.Hunter@health.mo.gov 573-526-0444

# Whitney Coffey Whitney.Coffey@health.mo.gov 573-751-6285