

MINUTES OF THE HOUSE HEALTH AND HUMAN SERVICES COMMITTEE

The meeting was called to order by Chairman Brenda Landwehr at 1:30 P.M. on January 24, 2007 in Room 526-S of the Capitol.

All members were present except:

- Clark Shultz- excused
- Jeff Colyer- excused
- Peggy Mast- excused
- Tom Holland- excused

Committee staff present:

- Renae Jefferies, Revisor's Office
- Melissa Calderwood, Legislative Research
- Mary Galligan, Legislative Research
- Patti Magathan, Committee Assistant

Conferees appearing before the committee:

- Dr. Lou Saadi, Kansas Department of Health and Environment

Others Attending:

- See Attached List.

Chair Landwehr opened the floor for bill introductions.

**Ron Seeber**, Mental Health Credentialing Association, requested a bill which adds three groups to those qualified to perform home studies for adoption processing. Motion made by Representative Morrison and seconded by Representative Neighbor. Motion carried.

Chair Landwehr then invited **Dr. Lou Saadi**, Kansas Department of Health and Environment (K.D.H.E.) to provide an overview of the accessibility of Kansas health statistics. Dr. Saadi informed the committee that she is the Director of the Office of Health Assessment, Center for Health and Environmental Statistics, Division of Health, K.D.H.E. Dr. Saadi stated that K.D.H.E. has historically published annual summaries of vital statistics. To meet the public's need for information in a more timely fashion they have developed two tools for getting data and information to their clients. (**Attachment 1**)

First is the Kansas Health Statistics Report which is disseminated via e-mail and is also available on the agency's web site.

Second is a queriable data tool, Kansas Information for Communities (K.I.C.), which is internet based. This tool delivers data specifically tailored to meet user needs. Data placed on K.I.C. comes from some of the most popular data sets maintained by the agency, such as birth, death, cancer, and hospital discharge data. K.I.C. is widely used by public health agencies, researchers, students, program managers and the media and gets about 30,000 hits to the website per month.

Dr. Saadi added that K.I.C. is sensitive to privacy issues and protects confidentiality while assuring data usefulness.

Following a brief question and answer session, Chair Landwehr complimented Dr. Saadi on the product and how far they have come since she (the Chair) has been involved with the Health and Human Services Committee.

Meeting was adjourned at 2:20 P.M. Next meeting is January 25, 2007 at 1:30 P.M.





Kathleen Sebelius, Governor  
Roderick L. Bremby, Secretary

DEPARTMENT OF HEALTH  
AND ENVIRONMENT

www.kdheks.gov

Division of Health

## Accessibility of Kansas Health Statistics

Testimony

to

House Health and Human Services Committee

Presented by Lou Saadi, PhD

Director, Office of Health Assessment

Center for Health and Environmental Statistics

Division of Health

Kansas Department of Health and Environment

January 24, 2007

Madame Chair, members of the committee, my name is Lou Saadi and I am the Director of the Office of Health Assessment, Center for Health and Environmental Statistics, Division of Health, KDHE. I appreciate this opportunity to share with you some of the efforts we're making at KDHE to make public health data more accessible to those needing it for policy decision-making, program management and education.

As you are aware, traditional public health datasets such as vital statistics and infectious diseases have been maintained by KDHE for decades. I'm sure you're familiar with our Annual Summary of Vital Statistics that is published annually which is our standard summarization of vital events for the state. These documents are large, costly and wide dissemination is difficult. So how do we meet the need for information by the public and how do we disseminate these data to data users such that they can acquire the information needed in a rapid efficient, reliable manner? KDHE has developed two major tools for getting data and information to those who need it. The *Kansas Health Statistics Report* and a queriable data tool we call KIC, which stands for (Kansas Information for Communities).

The *Kansas Health Statistics Report* was created to disseminate health statistics from the Center as well as other contributors about health issues of the day. The report is disseminated via e-mail and maintained on the agency's website. Over 1,200 policy makers, researchers and media representatives receive this document quarterly. Topics covered in the report span the entire spectrum of issues of interest in health and health care, and range from hospitalizations experienced by children to c-section trends. We've included copies of this report for your review in your packets, and would be happy to add you to our mailing list as you desire.

Still, there is a need to acquire data specifically tailored to meet the needs of the public health nurse writing a grant, a newspaper reporter writing an article, a public health program

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ATTACHMENT 1-1

manager needing data to justify resource allocation. We believe we have created a queryable data system that addresses this need.

Just a brief history, in 2000, several states embarked on establishing a better way to share data with users through Internet query systems. Missouri's department of health was a leader in the area and Kansas adopted their MICA (Missouri Information for Community Assessment tool). Through a grant from the Health Resources and Services Administration (HRSA), KDHE acquired the programming for the MICA tool and created KIC, which went live in late 2000. This Internet system, available on a 24/7 basis, is designed for use by those with a need for basic information and limited statistical knowledge. KIC experiences over 30,000 hits to the website per month and rising.

Data are placed on KIC from some of the most popular datasets maintained by the agency—such as birth, death, cancer, and hospital discharge data. KIC is widely used by public health agencies, researchers, students, program managers and the media among others. This year, with funding from the Kansas Health Foundation, KDHE is expanding KIC to include additional datasets that can offer a glimpse at other contributors to health. Our partners from other state agencies are assisting us in developing this "Health Information Portal". Plans include offering queryable Behavioral Risk Factor Surveillance System (BRFSS) data at a local level where data are available, KDOT's motor vehicle crash data, crime statistics, health professional, education and housing data. A recently developed feature, KIC FastStats, the KIC visitor can acquire health statistics at a glance but further query the KIC system for more details.

Finally, one of the features of KIC is its robust protections of confidentiality and small numbers. KDHE is sensitive to privacy issues and builds in the most protection while assuring data usefulness for smaller populations.

I can only give you a short demonstration of what KIC has to offer. I encourage you to explore its features on your own. Please don't hesitate to contact myself or my staff for a personal demonstration. Thank you for your time and I look forward to your comments or suggestions.