

Health Information Exchange

Data Governance Council Charter

Version 1.5



REVISION HISTORY

Date	Version	Description	Author
3/16/2023	1.0	Initial Draft, based on the Data Governance Framework Developed by Briljent for the Vermont HIE Program	Kristin McClure, Mahesh ThopaSridharan
3/23/2023	1.1	Feedback incorporated during DG Council kickoff	Mahesh ThopaSridharan
3/30/2023	1.2	Merged edits & comments from Beth Anderson, Jessie Hammond and Eric Schultheis	Mahesh ThopaSridharan
4/3/2023	1.3	Incorporated additional feedback from the DG Council	Kristin McClure, Mahesh ThopaSridharan
4/20/2023	1.4	Incorporated edits based on last round of feedback from the DG Council	Kristin McClure, Mahesh ThopaSridharan
5/1/2023	1.5	Last round of updates from DG Council incorporated. Draft FINALIZED.	Mahesh ThopaSridharan





DATA GOVERNANCE DEFINITIONS

Data Governance – Data Governance is a system of decision rights and accountabilities for information related processes, executed according to agreed-upon protocols. These protocols describe who can take what actions with what information, and when, under what circumstances, using what methods. It clearly identifies the roles and responsibilities of those who take part in those processes and how they should interact.

Unified Health Data Space – Vermont's Health Information Exchange (HIE) has evolved from a 'first generation' HIE which was focused on sending and receiving clinical records to a 'second generation' HIE with a more robust assortment of data types and services offered. With this transition and with the completion of the technology work, the ecosystem of the HIE is referred to as the Unified Heath Data Space.

Data governance is essential to managing the availability, usability, integrity, and security of data and forms the cornerstone for the Strategic HIE Plan.

PURPOSE OF DATA GOVERNANCE COUNCIL

The Data Governance Council exists to -

- 1. Ensure HIE data is managed in a secure, appropriate, informed and actionable manner.
- 2. Ensure all individuals can make informed decisions about the use of their personal health data.
- 3. Provide executive sponsorship, establish data oversight policies, and establish data access and release policies.
- 4. Document and provide transparency on the data management policies and principles that govern the use of the data
- 5. Ensure alignment to outcomes as specified in the Strategic HIE Plan.
- 6. Ensure availability of data to support a comprehensive care delivery model.

DATA GOVERNANCE COUNCIL VISION & MISSION

Vision: Function as a collaborative oversight body to establish data governance policies that ensure the value and use of data in Vermont's Unified Health Data Space is maximized while also ensuring its quality, privacy, and security. Ensure people are at the center of their health data and provide ongoing patient information education.

Mission: To cultivate best practices and to provide clear policies that govern the data aligned with the Strategic HIE Plan. Realization of societal/community/personal benefits through uses of health data that improve the understanding of health and health care.

To realize the vision of the HIE, Vermont needs data exchange policies and processes that recognize individualized needs while supporting holistic care, system measurement, and improvement. More data sources, each with its own regulatory and statutory restrictions, technical teams, and unique subject matter experts must be included.

Adopting a rigid approach does not achieve the appropriate balance of control and agility, leading to either the business bypassing policies to get the data it needs or over-centralizing its responsibilities. Though there is no one-size-fits-all approach to data governance, any successful program should have remnants of the following foundational elements. The intent of the Data Governance Council is to adopt an agile approach to data



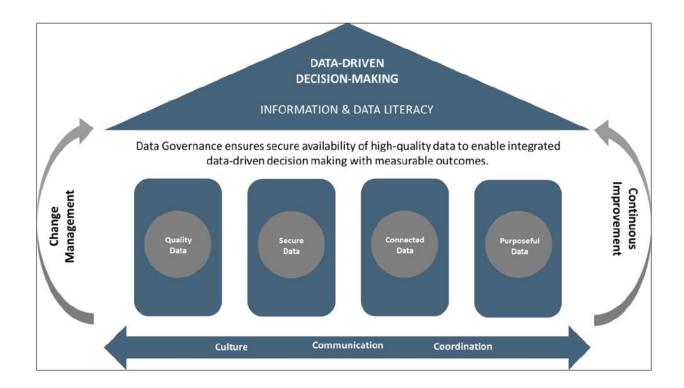
governance that can adapt to the changing landscape (which can include laws, policy, technology, processes) while maintaining stability and transparency.

- 1. Alignment to outcomes
- 2. Trust and alignment to Federal and State laws
- 3. Transparency
- 4. Accountability and Decision Rights
- 5. Collaboration
- 6. Risk and Security
- 7. Education and Training

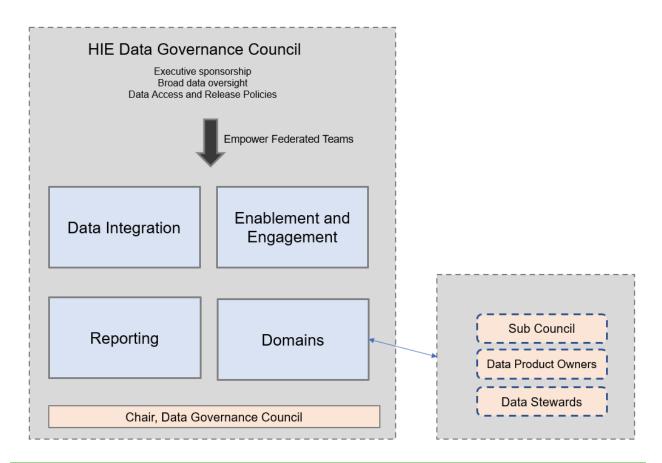
DATA GOVERNANCE COUNCIL GUIDING PRINCIPLES

- Provide responsible and clear data management policies to ensure informed and appropriate uses of the data
- 2. Alignment with Federal and State laws, rules, and regulations.
- 3. Data contributors should have the ability to access the data they contributed.
- 4. Measure desired and expected results through appropriate KPIs and metrics.
- 5. Data governance council will empower and solicit input and feedback from including but not limited to the Federated data governance sub Teams.
- 6. All individuals should have the opportunity to understand and direct how their personal health data may be used and shared.

DATA GOVERNANCE COUNCIL FRAMEWORK AND STRUCTURE







DATA GOVERNANCE COUNCIL ROLES AND RESPONSIBILITIES

The Data Governance Council will:

- 1. Form and empower Federated teams to support the execution and operations of data governance for the HIE in the context of Unified Health Data Space.
- 2. Establish relevant Key Performance Indicators (KPIs) and metrics for data governance, including oversight of the Federated core Team KPIs and metrics.
- 3. Track the status of governance activities and initiatives and make necessary adjustments to ensure effective collaboration and outcomes.
- 4. Recommend and approve data governance policies.
- Provide executive sponsorship for the Federated Teams. Ensure the Federated Teams have the appropriate composition and subject matter experts to provide recommendations on data policies.
- 6. Provide oversight of data management practices for data that is received by the HIE, stored in the HIE, and released from the HIE.
- 7. Proactive and timely prevention, management and mitigation of data privacy and security risks. Continuous improvement of the quality and utility of data resources.

DATA GOVERNANCE COUNCIL MEMBERSHIP

The Roles of the Data Governance Council are comprised of each stakeholder representative which include: person, payer, provider, public health, and policy maker as well as experts in the field of Health Equity, Data



Privacy, and VITL. The members of the committee were selected by the Chair to best enable data governance for the Unified Health Data Space. Membership is comprised of the below members.

The HIE support staff will act as administrative and operational support.

Name, <i>Organization</i>	Role	
Kristin McClure, AHS Office of Health Care Reform	Health Data Officer & Chair for the DG Council	
Eric Schultheis, <i>Vermont Legal Aid</i>	Health Care Advocate	
Jessie Hammond, Vermont Department of Health	Public Health Representative	
Beth Anderson, <i>VITL</i>	HIE Representative	
Jimmy Mauro, Blue Cross Blue Shield	Payer Representative	
Emma Harrigan, VT Hospital Association	Hospital Care Representative	
Kana Zink, Vermont Department of Health	Health Equity Expert	
Gabe Epstein, AHS Legal	Privacy Attorney	
David Kronoff, <i>Howard Center</i>	Privacy Officer	

DECISION MAKING

To ensure collaboration, it will be important that all stakeholders have equal input into key decision making. Discussions and any decisions must consider all perspectives so that final decisions are well-informed. As such, each member of the Data Governance Council is a voting member.

Decisions will be made by a majority vote. For a vote, the total number of Data Governance Council members required is half plus one. The committee will empower the Federated Teams and bring them in as appropriate to meetings to hear the Federated Teams' recommendations. The committee will determine if any additional parties are needed to be included to inform data governance decision making. Decisions will be logged by the scribe for that meeting. The committee will produce a decision document that describes the decisions. These notes will be made public on the healthdata.vermont.gov website within 72 hours of the meeting.

COMMUNICATIONS

MEETINGS

The expectations for the meetings are that (a) people participate either in person or via video conference call, (b) they have done any applicable work beforehand, (c) they actively participate and represent their organization.

Meetings will be held monthly and will assess frequency as appropriate.

WEBSITE

Meeting agenda, minutes, and resource materials will be posted on https://healthdata.vermont.gov Draft materials may be sent via email.