

# Summary of Evaluation Criteria: New State-Specific Tracking Content Area

Content Area:

Data Sources:

# **Phase I: Exploration**

#### **Resources available**

Question	Answer
Is there staff time/interest/expertise?	
Are there financial and technical	
resources available?	

#### **Prevalence**

Question	Answer
Is a high estimated proportion of the	
population exposed? [OR] Is there a high	
estimated prevalence of disease or outcome?	

### **Causality**

Question	Answer
Is there evidence that exposure is a	
component cause of adverse health	
outcomes? [OR] Is there evidence that	
that the disease has an environmental	
component cause?	

### Actionability

Question	Answer
Are there existing prevention or control	
programs at MDH or other Minnesota	
organizations for the exposure or its	
adverse health outcomes?	
Can the level of exposure or disease be	
modified through policy, regulatory, or	
personal actions?	
Is the exposure or disease tied to state or	
federal public health objectives?	
Can data and measures in this content	
area be used to develop new program	
initiatives?	



### **Public Health Impact**

Question	Answer
Is the population attributable risk (PAR)	
or public health impact of exposure	
known or be estimated from available	
data? [OR] Is the severity of the disease	
effect known and contributes to	
mortality or morbidity?	

### (Initial) Feasibility

Question	Answer
Is there one or more data sources for exploration	
of "trackable" indicators?	
Does MDH have the legal authority to collect and	
use the data?	
Are private data classified and protected	
according to state and federal law?	

# **Phase II: Feasibility**

## **Detailed Feasibility**

Question	Answer
What is the level of quality of the data?	
<ul><li>Is it population-based?</li></ul>	
<ul> <li>Is it representative of disease or</li> </ul>	
exposure in the state?	
<ul><li>Is it reliable and valid?</li></ul>	
Is there continuity in data collection?	
Is the data timely with acceptable lag	
times?	
Is the data comparable to other	
jurisdictions?	
Is aggregation possible at different	
geographic levels?	
What is the cost to MDH to obtain data?	



\* Pilot the data \*



## **Phase III: Recommendation**

### **Emerging Issues**

Question	Answer
Is the degree or level of exposure	
changing or perceived to be changing?	
[OR] Is the incidence or prevalence of	
disease changing or perceived to be	
changing?	

### **Potential for Information Building**

Question	Answer
Is this a hazard with unknown associations	
to health outcomes or unknown level of	
exposure in the population? [OR] Is this a	
disease with unknown environmental	
etiology or unknown prevalence?	
Are there other programs at MDH that	
would be interested in this content area?	

### **Outside Interest or Public Concern**

Question	Answer
Is there a high concern regarding the proportion	
of the population exposed to the hazard? [OR] Is	
there a high concern regarding prevalence and	
etiology of disease?	
Is the exposure or disease a priority that has	
previously been identified by environmental	
health organizations?	
Would this content area utilize existing datasets	
in a new way?	

### **Balance among content areas**

Question	Answer
Is there balance between hazard/exposure and	
disease content areas tracked?	
Is there balance between age groups affected	
among content areas tracked?	

### **Economic Impact**

Question	Answer
What is the economic impact on MN EPHT	
Program and partners of adding this content	
area (e.g. state, healthcare systems, industry)?	