

# Data Stories & Placemats Toolkit

## USING DATA-DRIVEN DECISION MAKING IN COMMUNITY NEEDS ASSESSMENTS

### Introduction

To provide a summary of available quantitative and qualitative information to participants engaged in prioritization, the Needs Assessment Team (and partners) developed data stories and data placemats for each of the candidate priorities.

*“The way we package our words and our data is reflected in our audiences’ perceptions of our quality, credibility, and trustworthiness.” - Stephanie Evergreen<sup>1</sup>*

This toolkit was written based on the experiences of the Minnesota Needs Assessment team during the Title V Needs Assessment process. The best practices, processes, and lessons learned could be applicable beyond Title V work to other needs assessments, evaluations, and public health programs; however the information here is intended to support the work of other statewide Title V Needs Assessments taking place throughout the United States.

### Getting Started with Data Stories & Placemats

During the Minnesota Title V Needs Assessment process, data stories and placemats were created as end products of the Data and Capacity Assessment Stage. After initial qualitative and quantitative data collection activities (e.g. MDH listening sessions, Discovery Survey, key informant interviews, etc.) were completed, the Title V Data Team then created a template for the data stories and divided the 40 candidate priorities between a total of 76 team members and stakeholders who completed the first drafts and interdisciplinary reviews of each data story. Stakeholders included subject matter experts for each candidate priority both within and beyond the Minnesota Department of Health. The Department of Health relied on community-based organizations and other state agencies for certain candidate priorities where those stakeholders had more knowledge and expertise. Progress was tracked using a Microsoft Excel Sheet shared among the writers. During the writing process, team members and stakeholders conducted literature reviews on each of the 40 candidate priorities and used relevant qualitative and quantitative data to create the data stories and placemats. For more information on sources of qualitative and quantitative data and the data collection process, see the [Title V Maternal and Child Health Needs Assessment Plan](#).

The data stories and placemats were developed to communicate clear, concise, and accessible information to encourage broad participation from diverse stakeholders and community members in the ranking of candidate priorities. Best practices from the literature regarding displaying and communicating data were integrated into the format and writing of the data stories and placemats. Specifically, the following best practices regarding data from Petersen’s guide were used<sup>2, 3</sup>:

- Simple
- Stable
- Available
- Logical, Relevant, Important
- Has Broad Representation
- Political Feasibility

Finally, data stories went through an extensive review and editing process led by the Title V Needs Assessment team. Staff and subject matter experts from different candidate priorities collaborated to review one another's work. Drafts of the data stories were sent to reviewers two weeks in advance of the project deadline via email. Reviewers then used SharePoint to make edits, recommendations, and leave comments. Meetings with reviewers lasted between 30 and 60 minutes, and at least two staff members from the Title V Needs Assessment team were present at each meeting. Following the meetings, the Title V staff shared the final editing responsibilities. The finished data stories were then used by the Title V Needs Assessment team to create the placemats, which contained more concise information on each of the candidate priorities.

## Data Stories & Placemats Tasks and Timeline

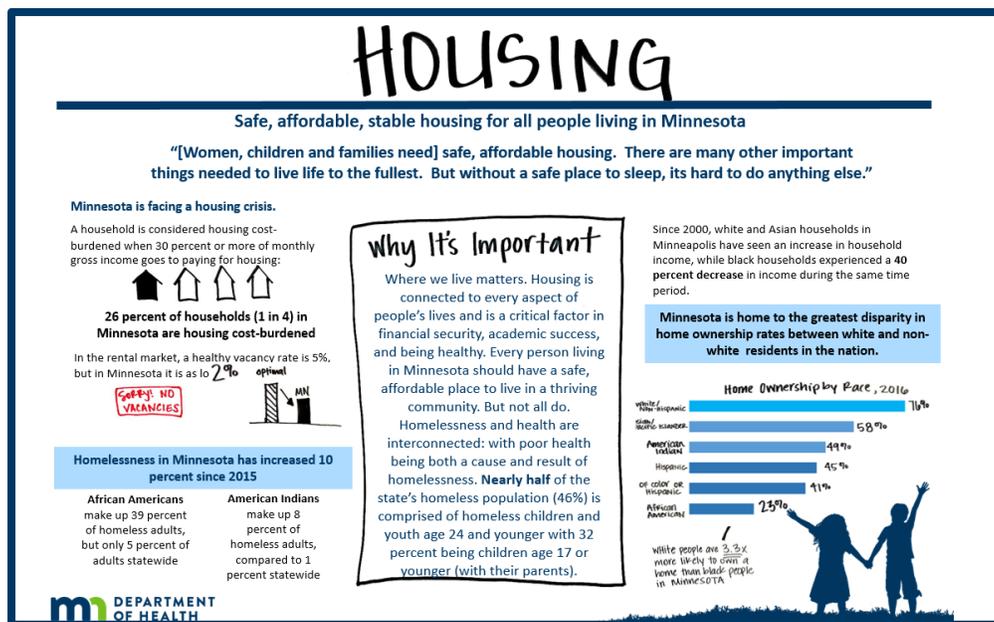
Once tasks were divided among the Title V Data Team, the data stories and placemats took approximately 5 months to design, create, and finalize (January – May 2019).

### Sharing Final Products

Data stories were made available on the MDH [Title V Needs Assessment webpage](#). Digital and print copies were distributed to stakeholders and community members during meetings, webinars, and forums over the summer of 2019.

Placemats will be made available on the MDH Title V Needs Assessment webpage during the fall of 2019. The team is currently working to ensure that the placemats are accessible, and will post them once they meet this requirement.

### Example of a Data Placemat



## Best Practices and Lessons Learned

- Data collection and analysis best practices from Petersen’s guide to Needs Assessment in Public Health were adapted and employed by the MN Needs Assessment team throughout the block grant process. These best practices included ensuring that data were simple, stable, available, logical, relevant, important, politically feasible, and had broad representation<sup>2,3</sup>.
- In creating the data stories and placemats, the team followed best practices regarding accessibility and presenting data to diverse audiences. To this end, data stories and placemats were designed to be low literacy, concise, and emphasize health equity and intersectionality.

## Helpful Resources

- Needs Assessment in Public Health: A Practical Guide for Students and Professionals by D.J. Petersen and G.R. Alexander (book).
- Presenting Data Effectively: Communicating Your Findings for Maximum Impact by Stephanie Evergreen (book).
- University of Kansas Center for Health & Community Development. Community Tool Box. (2019). [Community Tool Box \(https://ctb.ku.edu/en\)](https://ctb.ku.edu/en).
- Wisconsin Community Health Improvement Plans and Process Project. Listening to the Community’s Input: A Guide to Primary Data Collection. (2015). [LISTENING TO THE COMMUNITY’S INPUT: A Guide to Primary Data Collection \(https://www.countyhealthrankings.org/sites/default/files/resources/Listening to the Community.pdf\)](https://www.countyhealthrankings.org/sites/default/files/resources/Listening%20to%20the%20Community.pdf)

*Note: HRSA does not require state health departments to produce data stories or placemats as part of the Title V Block Grant application. The Minnesota Department of Health chose to develop the data stories and placemats as valuable resources to assist stakeholders and partners in the prioritization process and to encourage data-driven decision making.*

## Citations

1. Evergreen, S. D. H. (2018). *Presenting data effectively: Communicating your findings for maximum impact* (2nd ed.). Los Angeles: Los Angeles : SAGE.
2. Minnesota Department of Health - Division of Child and Family Health. (2017). [Title V Maternal and Child Health Needs Assessment Plan \(https://www.health.state.mn.us/docs/communities/titlev/titlevneedsassessplan.pdf\)](https://www.health.state.mn.us/docs/communities/titlev/titlevneedsassessplan.pdf)
3. Petersen, D.J. and Alexander, G.R. (2001). Needs Assessment in Public Health: A Practical Guide for Students and Professionals. Springer USA.

## DATA STORIES & PLACEMATS

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