

Mississippi State Department of Health

Data Encyclopedia

An overview of data sources and resources available through the
Mississippi State Department of Health



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Frequently Asked Questions

What is the Mississippi State Department of Health (MSDH) Data Encyclopedia?

The Data Encyclopedia is a listing of data sources and resources used at MSDH in performance of its mission to protect and advance the health, well-being and safety of everyone in Mississippi.

- **Data sources** are commonly used to assess and track population outcomes and contributors to disease.
- **Data resources** are tools that allow users to interact with this data.

This data inventory provides a high-level description of the type of information in each data source, the potential uses and limitations of the data, and the existing reports that summarize the data.

Who uses the Data Encyclopedia?

Internal and external partners use the MSDH Data Encyclopedia to get information about what data is collected, where it is stored and whom to contact regarding questions about the data.

How do I find a specific data source or resource?

Use the Table of Contents

Beginning on page 3, the [table of contents](#) provides a list of data sources and resources. Click on the source or resources to be directed to the page within the document. You can return to the table of contents from any page by clicking “Table of Contents” at the bottom of each page.

Use the search function

Type “ctrl-f” to bring up the search tool and type in key words. For best results, keep search terms short. For example: “tobacco” or “gender”.

What information is available?

An overview of the information included on the [data source](#) pages and [data resource](#) pages is provided.

What is included in the Encyclopedia?

This inventory contains descriptions of data maintained and overseen by MSDH programs and services. MSDH is responsible for maintaining data in a variety of areas, including (but not necessarily limited to) disease surveillance, environmental protection, disease and injury prevention,

standards of care, immunizations, facility and professional licenses, birth and death records, and social services. Combined, these program areas are essential services designed to improve the health and safety of all Mississippi residents.




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Data Sources Summary

Data Source Type	Color Code	Overview
<p>Surveys, Registries and Surveillance Systems</p>		<ul style="list-style-type: none"> • Surveys consist of self-reported responses, often using a weighted sample to accurately represent the population of Mississippi, typically being completed at a single point in time. • Registries and Surveillance Systems contain information, collected at regular intervals or continuously, and often contain health related data for a defined population.
<p>Claims and Discharge Data</p>		<ul style="list-style-type: none"> • Based on billing information from visits to a health care provider • Claims data is information about what an insurer paid for a given service • Discharge data provides diagnosis and procedure codes documented during a visit to a health care provider • May not entirely describe what occurs during a visit to a health care provider
<p>Regulatory and Licensing Data</p>		<ul style="list-style-type: none"> • Used to collect license and compliance information • Licensing data captures authorizations for individuals or establishments that provide a service that may affect public health • Regulatory data tracks individual or establishment compliance and their ability to meet standards to protect public health

Data Source Overview

Purpose	What purpose does this data serve?
Public Use Dataset	Is this data set available for public use?
Design	What are the data collection methods?
Authority for Collection	What is the authority under which the collection of this information is authorized?
Frequency	How often is the data collected and when does data become available?
Population (Units)	Who is represented in the data set?
Geographies	What state and substate geographies are available? State, County, Health District, Hospital Service Area?
Data Years	When did data collection begin and what is the most current year available?
Strengths	What is the data useful for?
Limitations	What information may not be represented in the data? What caution should be taken when looking at data results? What biases exist?
Indicators for Analysis	Which key indicators are collected in the data?
Health Equity Indicators	What key health equity and social determinants of health indicators are collected in the data?
Reports / Online Resources	Which regular or large reports use this data? (for example, annual reports, data briefs, legislative reports, etc.) Where can these reports be found?
Who Manages Data	Who is responsible for the data? Which additional systems at MSDH, or any other government or non-government body, is the data made available through?
Funding Sponsor	Who funds the data collection?
Data Request	Where to request the data from the agency (if not already available through the MSDH website)
To Learn More	Where to explore additional information?

Surveys, Registries and Surveillance Systems



Survey Template		S RSS
Purpose	Please write one sentence describing the purpose of this survey.	
Public Use Dataset	Is this data set available for public use?	
Design	What are the data collection methods?	
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	
Frequency	How often is the data collected and when does data become available?	
Population (Units)	Who is represented in the data set?	
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	
Data Years	What year did data collection begin and what is the most current year available?	
Strengths	What is the data useful for?	
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	
Indicators for Analysis	Which key indicators are collected in the data?	
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	
Who Manages Data	Who is responsible for the data?	
Funding Sponsor	Who funds the data collection?	
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	
To Learn More	Where to explore additional information?	

Behavior Risk Factor Surveys (BFRSS)

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	The BRFSS tracks health-related risk behaviors, chronic health conditions, and use of preventive services among Mississippi adults to assess progress on public health goals and to plan, support and evaluate health promotion programs.
Public Use Dataset	Is this data set available for public use?	Yes
Design	What are the data collection methods?	Telephone interviews
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is	Centers for Disease Control and Prevention and MSDH. Data is retained indefinitely.
Frequency	How often is the data collected and when does data become available?	Every year, in August or September.
Population (Units)	Who is represented in the data set?	Adult population in MS
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County, Health District, Hospital Service Area? State and County (County is available in PLACES CDC)
Data Years	What year did data collection begin and what is the most current year available?	2022
Strengths	What is the data useful for?	Identifying risky behaviors, screening patterns and disease trends over several layers of population across all adult population in MS.
Limitations	What items may not be represented in the data?	Not a census; a representative sample of surveys weighted to represent the adult Mississippi population. Not weighed for county-level analysis. Information is self-reported

	<p>What caution should be taken when looking at data results?</p> <p>What biases exist?</p>	
Indicators for Analysis	Which key indicators are collected in the data?	Demographics (Age, Disability, Education, Employment, Gender, Income, LGBT, Race/Ethnicity); Chronic Conditions (Arthritis, Asthma, Cancer, Cardiovascular Disease, Cognitive Decline, COPD, Depression, Diabetes, High Cholesterol, Hypertension, Obesity, Oral Health); Preventive Measures (Doctor Visits, Family Planning, Fruit & Vegetable Consumption, Health Insurance, Immunizations, Physical Activity, Screenings, Quality of Life/Healthy Days); Risk Factors and Behaviors (Alcohol Consumption, Cannabis Use, Drinking Water, Firearm Storage, Prescription Drug Misuse, Seatbelt Use, Sexual Violence, Substance Use, Tobacco Use, Traumatic Brain Injury)
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex or Biological Sex, Gender or Gender Identity, Sexual Orientation, Race, Ethnicity, Socioeconomic Status (Educational attainment, Employment, Household income), Disability Status (Physical, Mental/Emotional), Federal Poverty Level, Veteran/Military Status, Housing Status, Food Security, Job Security, Transportation, Healthcare, Physical Environment/Neighborhood, Perceptions around Discrimination and/or Racism, Exposure to Violence or Trauma, Social Integration
Reports / Online Resources	<p>Which regular or large reports use this data?</p> <p>Annual reports, data briefs, legislative reports, etc.</p> <p>Where on msdh.ms.gov can this data and these reports be found?</p>	Reports - Mississippi State Department of Health (ms.gov)
Who Manages Data	Who is responsible for the data?	Epidemiologist
Funding Sponsor	Who funds the data collection?	CDC
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online form

To Learn More	Where to explore additional information?	https://msdh.ms.gov/page/31,0,110.html
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Pregnancy Risk Assessment Monitoring System (PRAMS)		S RSS
Purpose	Please write one sentence describing the purpose of this survey.	PRAMS asks questions to mothers about their pregnancy and their new baby to understand why some babies are born healthy and others are not.
Public Use Dataset	Is this data set available for public use?	Multi-state data: requested through CDC Mississippi data: requested through Office of Data Governance / MS PRAMS Program
Design	What are the data collection methods?	Paper questionnaire survey with phone follow-up and web option. Includes selecting Birth Certificate fields. A questionnaire is sent to a random sample of Mississippi mothers from 2 to 6 months after having a live birth in MS. Mothers are sampled using birth certificate data. Women with low-birth-weight infants (<2500g) are over-sampled. Data is weighted to be representative of the population.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is	Centers for Disease Control and Prevention and MSDH. Data is retained indefinitely.
Frequency	How often is the data collected and when does data become available?	Data collected on an ongoing basis; analytic files updated per calendar year birth cohort. Data available after weighing, generally 10 to 12 months after a cohort's last births.
Population (Units)	Who is represented in the data set?	Mississippi resident mothers who have recently had a live birth.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State

Data Years	What year did data collection begin and what is the most current year available?	Data available for 2002-2004, 2006, 2008-2011, and 2016–2021 birth cohorts. Selecting indicators vary by phase (3 to 5-year periods between questionnaire revisions).
Strengths	What is the data useful for?	A linkage to the birth certificate means PRAMS builds upon existing information. PRAMS covers topics not available elsewhere: e.g., prenatal care content; drinking amount; breast-feeding support; pregnancy intentions, and sensitive questions on drug use and domestic violence. Can be compared to other PRAMS sites that meet a response rate threshold.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Only includes pregnancies resulting in a live birth. Self-reported data can tend to underreport certain health outcomes. Data suppression is due to small numbers in Mississippi.
Indicators for Analysis	Which key indicators are collected in the data?	Preconception health and family planning; prenatal care; alcohol, tobacco, and drug use; intimate partner abuse; breastfeeding; social support; sleep environment; dental health; postpartum care; demographics (age, sex, race/ethnicity, education, income).
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex, Race, Ethnicity, Socioeconomic Status (Educational Attainment, Employment, Household Income), Healthcare, Exposure to Violence or Trauma
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	MS PRAMS Webpage Annual prevalence reports, data briefs

Who Manages Data	Who is responsible for the data?	Mississippi State Department of Health, Office of Vital Records and Public Health Statistics
Funding Sponsor	Who funds the data collection?	Mississippi PRAMS is funded by CDC and the Mississippi State Department of Health Office of Vital Records.
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online form
To learn More	Where to explore additional information	PRAMS - Mississippi State Department of Health

Levels of Care Assessment Tool (LOCATe)

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	The Centers of Disease Control and Prevention (CDC) & Levels of Care Assessment Tool or LOCATe are utilized to assess the level of neonatal and maternal care in facilities across the state.
Public Use Dataset	Is this data set available for public use?	De-identified aggregated data is available for public use
Design	What are the data collection methods?	REDCap is a survey administration and collection system that MSDH uses. A REDCap user can build or upload survey templates that can be emailed to participants via a public or individual link. Once a participant receives the link, they can complete the survey, and the data collected from that survey is housed within the REDCap system as a data set to be analyzed.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is	Authority: MSDH & CDC Retention period: 6 years
Frequency	How often is the data collected and when does data become available?	<ul style="list-style-type: none"> • Can be annually. Last time this survey was conducted was in 2016 and then again in 2023. • Data becomes available after CDC returns scores and once the hospitals receive their scores
Population (Units)	Who is represented in the data set?	Birthing Hospitals (Neonatal and Maternal Units)
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State & Health Districts
Data Years	What year did data collection begin and what is the most current year available?	Data collection begins in 2016 and the most current year available is 2023.

Strengths	What is the data useful for?	<ul style="list-style-type: none"> Identifying levels of neonatal and maternal units in each birthing hospital Identifying discrepancies in self-reported levels and LOCATe assessed levels
Limitations	<p>What items may not be represented in the data?</p> <p>What caution should be taken when looking at data results? What biases exist</p>	<ul style="list-style-type: none"> Voluntary: Might not be representative of all birthing hospitals in the state Would it be difficult to release county level data due to running the risk of identifying a hospital
Indicators for Analysis	Which key indicators are collected in the data?	<ul style="list-style-type: none"> Levels of care Births and deliveries in each participating facility How many women and infants needed to be transferred to a higher-level facility for care. Staffing capacity Technology capacity
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	None
Reports / Online Resources	<p>Which regular or large reports use this data?</p> <p>Annual reports, data briefs, legislative reports, etc.</p> <p>Where on msdh.ms.gov can this data and these reports be found?</p>	None
Who Manages Data	Who is responsible for the data?	MSDH LOCATe Team (Dr. Dorothy Young, Stephanie McLeod, Jessi M. Shuey)
Funding Sponsor	Who funds the data collection?	CDC and MSDH
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online form
To Learn More	Where to explore additional information?	No Additional Information is available at this time.

Diabetes Blood Glucose Screenings		S RSS
Purpose	What purpose does this data serve?	(answer forthcoming)
Public Use Dataset	Is this data set available for public use?	NO
Design	What are the data collection methods?	Data entry by program staff
Authority for Collection	What is the authority under which the collection of this information is authorized?	CDC grant needs; 7 years
Frequency	How often is the data collected and when does data become available?	As We perform events and screenings
Population (Units)	Who is represented in the data set?	Adult population in MS
Geographies	What state and substate geographies are available? Health events State, County, Health District, Hospital Service Area?	N/A
Data Years	When did data collection begin and what is the most current year available?	We did it during 2021 but streamlining the process now. So, first year will be 2024
Strengths	What is the data useful for?	Program planning, identifying diabetes risk populations and planning DSMES referrals and DPP recruitment
Limitations	What information may not be represented in the data? What caution should be taken when looking at data results?	No, representative data for program planning only.

	What biases exist?	
Indicators for Analysis	Which key indicators are collected in the data?	Demographics, Blood glucose level, HBA1C
Health Equity Indicators	What key health equity and social determinants of health indicators are collected in the data?	Gender
Reports / Online Resources	Which regular or large reports use this data? (for example, annual reports, data briefs, legislative reports, etc.) Where can these reports be found?	(answer forthcoming)
Who Manages Data	Who is responsible for the data? Which additional systems at MSDH, or any other government or non-government body, is the data made available through?	Redcap Administrators
Funding Sponsor	Who funds the data collection?	CDC
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	submit your request through our online form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/page/43,0,296.html

Community-Based Organization

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	Community Health Workers input REDCap intake form survey data to provide linkage to social support, wrap around services, assist with navigating social resources to address concerns food insecurity, transportation, emotional trauma, access to shelters, call centers, and preventive services.
Public Use Dataset	Is this data set available for public use?	Not available for public use
Design	What are the data collection methods?	REDCap
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is	Office of Community Health Workers. Retention period undetermined.
Frequency	How often is the data collected and when does data become available?	Data is collected daily. Data becomes available in March 2023.
Population (Units)	Who is represented in the data set?	The hard-to-reach clients in Mississippi community who need social supports.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	All counties in Mississippi
Data Years	What year did data collection begin and what is the most current year available?	Data collection began in March 2023.

Strengths	What is the data useful for?	Ensures clients have access to clinical care, post-hospitalization, behavioral health & care for substance use disorder, and social service referrals.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist	Entered manually by Community Health Workers; need to clean data and contact CHW to confirm the information correction.
Indicators for Analysis	Which key indicators are collected in the data?	Social determinants of health metrics.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	N/A
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Annual reports, data briefs, legislative reports, etc. CHW weekly report.
Who Manages Data	Who is responsible for the data?	Office of Community Health Workers.
Funding Sponsor	Who funds the data collection?	Office of Community Health Workers.
Data request	If you would like to request data from the agency (if not already available through the MSDH website).	submit your request through our online form
To Learn More	Where to explore additional information?	No additional Information is available at this time.

EPIC Beaker

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	Lab information clinical system. The purpose is to record test results and store test information. Only for the Department of Health
Public Use Dataset	Is this data set available for public use	Department of health and any facility submits a request. Some can access a web portal but can't access epic patient chart that is only for MSDH.
Design	What are the data collection methods?	Enter the demographics and test for the patients. MSDH and UMMC order through EPIC clinics. Any other clients would submit their request through paper.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Clinical Laboratory Improvement Amendments, MSDH. The use of Epic Beaker began in March 2023 data retention began at that time and will continue indefinitely.
Frequency	How often is the data collected and when does data become available?	The data is collected daily, we receive specimens daily. It is available as soon as the test is verified. Some tests are daily, and some may take 48 hours.
Population (Units)	Who is represented in the data set?	Majority of our patients are MSDH patients, but we can receive any specimens that need testing. Any citizen in the state of Mississippi can be represented.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	The geographies are available to the State, County, and Health District.
Data Years	What year did data collection begin and what is the most current year available?	2024 is the most current year available. Started with Beaker in 2023. I have been using Epic since 2017.
Strengths	What is the data useful for?	Reporting data to STD program and office of communicable diseases and MSDH Tuberculous program. It shows disease trends for surveillance

Limitations	<p>What items may not be represented in the data?</p> <p>What caution should be taken when looking at data results?</p> <p>What biases exist?</p>	<p>If we don't receive something to test, then it will not be in our system. The bias would be that we only provide information on what we receive. We have no control on who or where the specimens are coming from, we only report what we receive. They come from lab; it is not all of Mississippi's data.</p>
Indicators for Analysis	<p>Which key indicators are collected in the data?</p>	<p>We collect patient's demographics, test results, and orders.</p>
Health Equity Indicators	<p>Please fill out a questionnaire related to health equity indicators.</p>	<p>N/A</p>
Reports / Online Resources	<p>Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc.</p> <p>Where on msdh.ms.gov can this data and these reports be found?</p>	<p>Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc.</p> <p>MSDH Annual report and the CDC uses this data. Our data is only available to our clients.</p>
Who Manages Data	<p>Who is responsible for the data?</p>	<p>Mississippi Public Health Lab Staff are responsible for the data.</p>
Funding Sponsor	<p>Who funds the data collection?</p>	<p>Federal Grants pay for the maintenance</p>
Data Request	<p>Where to request the data from the agency (if not already available through the MSDH website)</p>	<p>Submit your request through our online form</p>
To Learn More	<p>Where to explore additional information?</p>	<p>No additional Information is available at this time.</p>

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Community Health Prevention Program (CHPP)		S RSS
Purpose	What purpose does this data serve?	To build agency capacity to implement evidence and practice-based interventions that extend prevention beyond the clinic setting into communities. Health Priorities: a. Support statewide implementation of evidence and practice-based interventions that promote health and prevent/reduce the risk factors associated with childhood and adult obesity, diabetes, heart disease, stroke and other chronic conditions. b. Maximize reach and impact in communities, schools, early childhood education (ECE's), workplaces, faith-based and health systems environments to improve nutrition, physical activity and reduce tobacco use and exposure with an emphasis on disparate populations. c. Increase collaboration between public health regional staff and community partners in efforts to implement chronic disease prevention and health promotion strategies that support policy, systems, and environmental change. d. Leverage resources in collaboration with a variety of public and private partners.
Public Use Dataset	Is this data set available for public use?	Not available
Design	What are the data collection methods?	Whole Child Whole Community Model; Policy, Systems, and Environmental Change Strategies
Authority for Collection	What is the authority under which the collection of this information is authorized?	Division of Nutrition, Physical Activity, and Obesity, Centers for Disease Control and Prevention
Frequency	How often is the data collected and when does data become available?	Annually

Population (Units)	Who is represented in the data set?	All age groups across Mississippi
Geographies	What state and substate geographies are available? Health events State, County, Health District, Hospital Service Area?	Mississippi Communities
Data Years	When did data collection begin and what is the most current year available?	Most Current 2023
Strengths	What is the data useful for?	Data is collected and submitted by trained Community Health Directors and Health Educators. The overall evaluation framework consists of performance measures which address the type/level of program activities conducted.
Limitations	What information may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Current tools for data collation and submission need revision.
Indicators for Analysis	Which key indicators are collected in the data?	# of community collaborations established to address health related needs; of coalition meetings attended, # of self-management workshops conducted, # of Mayoral Health Councils established, # of new partnerships developed; # of trainings attended
Health Equity Indicators	What key health equity and social determinants of health indicators are collected in the data?	N/A
Reports / Online Resources	Which regular or large reports use this data? (for example, annual reports, data briefs, legislative reports, etc.) Where can these reports be found?	N/A

Who Manages Data	Who is responsible for the data? Which additional systems at MSDH, or any other government or non-government body, is the data made available through?	Mississippi State Department of Health, Office of Preventive Health
Funding Sponsor	Who funds the data collection?	Department of Health and Human Services
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/page/43.html

Tuberculosis Program - Communicable Disease Case Information System (CDCIS)

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	The TB CDCIS system serves as the clinical data management system for the MSDH TB Program for TB suspect/disease and TB Infection (TBI) patients.
Public Use Dataset	Is this data set available for public use	Not available
Design	What are the data collection methods?	Patients are classified based on disposition as a TB suspect, case, or TBI; patients may have multiple episodes attributed to prior history or recurrence of disease, contacts to multiple TB suspects/cases, or multiple episodes for TBI treatment. The system is neither ELR nor ECR compliant; data is manually entered by TB Program staff from ELRs printed from Epi-Tracks, hardcopy medical records, and laboratory reports from providers and the MS Public Health Laboratory. CDCIS has the capability to electronically report the "Report of Verified Case of Tuberculosis" (RVCT) to the CDC; typically occurs weekly at the close of business.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	MSDH rules and regulations, including "Rules and Regulations Governing Reportable Disease and Conditions." https://msdh.ms.gov/page/resources/1719.pdf
Frequency	How often is the data collected and when does data become available?	The CDCIS system is updated daily as reports, demographic, and clinical data are received.
Population (Units)	Who is represented in the data set?	Mississippi residents, in addition to out of state residents assessed, and/or receiving treatment in Mississippi. Data is also received on MS patients assessed or treated in other states.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, Public Health District, County, and City/Town.

Data Years	What year did data collection begin and what is the most current year available?	Estimated start date of CDCIS implementation is the early 2000's – 2024 (YTD).
Strengths	What is the data useful for?	Data provides clinical management of TB disease/suspect and TBI patients in MS, provides for reports of non-tuberculosis mycobacterium (NTM), and serves as the source Mississippi TB and NTM data.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	TB disease/suspect and TBI patients may be managed in other states and reports to MSDH may be delayed. Data may not be complete due to ongoing patient management. Manual entry of all data may contribute to data quality issues. While the same laws and regulations governing reporting suspected TB, TB disease, TBI, and NTM, apply across the state, data gaps or delays from some providers may occur.
Indicators for Analysis	Which key indicators are collected in the data?	Demographic data, laboratory and clinical data pertinent to managing TB disease/suspects, TBI patients, contacts, and patients report with a non-tuberculous mycobacterium. Specific demographic data, risk factors, TB signs and symptoms, clinical, and laboratory data required for reporting of TB cases on the CDC RVCT.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex or Biological Sex, Gender or Gender Identity, Sexual Orientation, Race, Ethnicity, Socioeconomic Status (Employment), Language, Housing Status/Homeless History, Immigration Information, and Correctional History.
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Reports requested by TB Program or MSDH leadership, MSDH annual reports, external stakeholder requests, and the CDC annual MMWR. MSDH TB Program data is located on: Tuberculosis - Mississippi State Department of Health
Who Manages Data	Who is responsible for the data?	MSDH TB Program staff
Funding Sponsor	Who funds the data collection?	Funding is provided by state funds and CDC Division of Tuberculosis Elimination (DTBE), through federal grant funding.
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/msdhsite/static/14,0,125.html

Communicable Diseases Reporting / Surveillance System – Epi Tracks

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	Epi Tracks the surveillance database for all patient level case investigation and lab data (except for HIV) for reportable diseases collected by the State of Mississippi’s Epidemiology program.
Public Use Dataset	Is this data set available for public use	Not generally available. De-identified data is shared with the CDC to meet grant requirements. Certain data can be requested through MSDH’s Public Records Request process.
Design	What are the data collection methods?	Data are collected via electronic lab submissions (using the PHIN ELR Messaging Guide HL7 standard) and manually entered. Based on 2023 estimates, 85% of all lab results were ELR and 15% were manually entered.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Section 41-3-17, Mississippi Code of 1972 as amended Please refer to the Rules and Regulations Governing Reportable Diseases and Conditions, Please refer to Data Governance for the data retention policy. This is determined by the Mississippi Department of Archives and History.
Frequency	How often is the data collected and when does data become available?	The system is updated daily (or hourly depending on the frequency of the data source). MSDH reporting guidelines have different reporting timeframes for different classifications of disease ranging from within 24 hours to up to 3 weeks.
Population (Units)	Who is represented in the data set?	Every instance of a reportable disease diagnosed in Mississippi. Occurrences in Mississippi are represented in this data set (MS residents and out-of-state residents diagnosed in MS). We also receive data on MS residents diagnosed with reportable diseases in other states.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County, Town, Health District
Data Years	What year did data collection begin and what is the most current year available?	2006–2022 (YTD)
Strengths	What is the data useful for?	It is a complete surveillance database of all reportable diseases under Epidemiology’s purview. Allows for analysis of trends over time. Analysis can be performed by individual or by disease occurrence.

Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Some MS residents who are diagnosed out of state may not be reported to MSDH. Data quality varies due to many different staff entering in data. Not all lab data are electronically received yet, meaning resources are dedicated to manual entry as non HL7 import/loading features are extremely limited. While the same laws apply across the state for disease reporting, there are likely unknown gaps in reporting from certain providers/facilities. NOTE: the vendor has unsettled support for Epi Tracks. MSDH is in the process of procuring a new surveillance system – ETA is sometime in 2024 / 2025. Until then, the Epi tracks vendor is in negotiations to provide ad hoc professional service to ensure Epi Tracks is functional.
Indicators for Analysis	Which key indicators are collected in the data?	Demographic factors (age, sex, race), Infectious disease-specific data, Geographic location, and for some conditions, Risk Factors for Disease
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex or Biological Sex, Gender or Gender Identity, Sexual Orientation, Race, Ethnicity, Socioeconomic Status (Employment), Correctional History, (Physical, Mental/Emotional), and Housing Status
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	CDC's Morbidity and Mortality Weekly Report (MMWR) summarizes national reportable disease data, including MS data.
Who Manages Data	Who is responsible for the data?	Office of Communicable Diseases, Epidemiology Program
Funding Sponsor	Who funds the data collection?	N/A: Data collection is based on MS Public Health Rules and Regulations
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online form
To Learn More	Where to explore additional information?	Reportable Diseases - Mississippi State Department of Health (ms.gov)

Enhanced HIV/AIDS Reporting System (eHARS)

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	eHARS is a CDC-supplied system used to store case report forms and laboratory results of people living with HIV. Data from this system is downloaded and sent to CDC each month.
Public Use Dataset	Is this data set available for public use	Not available to public
Design	What are the data collection methods?	HIV and AIDS are reportable conditions under the Mississippi Reportable and Communicable Diseases Rule. Reportable laboratory values include HIV viral load measurements (including non-detectable results), all CD4 counts and percentages, and all HIV subtype and HIV nucleotide sequence data from antiretroviral drug resistance testing. Laboratory results are extracted from NBS (or manually entered from paper results) and uploaded into eHARS each month. Case report forms are sent by providers and entered the system manually.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	HIV is a class 1B reportable condition, which is a disease of major public health importance which shall be reported directly to the Department of Health by telephone in the next business day after knowledge or suspicion. Data is housed in EHARS indefinitely, as it allows us to monitor a person’s viral load status, in care status, etc.
Frequency	How often is the data collected and when does data become available?	Database is updated at least monthly. Data is uploaded to CDC at the end of every month. The dataset created at the end of December is considered the “frozen” dataset for that calendar year.
Population (Units)	Who is represented in the data set?	Any person who is a resident of Mississippi who was diagnosed in Mississippi or receiving care in Mississippi for HIV or AIDS.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County
Data Years	What year did data collection begin and what is the most current year available?	1983 through present. Realtime data available as needed.
Strengths	What is the data useful for?	HIV-related data collected by the Mississippi Department of Health are useful for estimating disease incidence and prevalence. This data are also used for monitoring

		trends in the infection that can be used to inform resource allocation for prevention and care. Monthly, de-identified HIV data are transmitted to the CDC that informs national HIV surveillance. Includes clinical data, demographic, and behavioral risk information.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Lag in reporting when lab results are received without case report forms. Does not capture people known to be living with HIV who have not been reported to the Health Department or for whom laboratory values have not been or are not being reported. Does not capture people living with undiagnosed HIV infection in Mississippi. Data requests may need to be reviewed and approved by the Overall Responsibility Party (State Epidemiologist).
Indicators for Analysis	Which key indicators are collected in the data?	Demographic factors (age, sex, race/ethnicity, residence), Diagnostic and treatment info (earliest date, residence, provider, facility, continuation of care)
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex or Biological Sex, Gender or Gender Identity, Race, Ethnicity
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	The Mississippi Department of Health produces annual HIV reports. Every five years, an HIV Epidemiologic Profile is also produced.
Who Manages Data	Who is responsible for the data?	Mississippi Department of Health, Office of Communicable Diseases, STD/HIV Program
Funding Sponsor	Who funds the data collection?	Centers for Disease Control and Prevention; National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention; Division of HIV/AIDS Prevention; Quantitative Sciences and Data Management Branch
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To Learn More	Where to explore additional information?	HIV Planning Council - Mississippi State Department of Health (ms.gov)

Evaluation Web (HIV)

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	Collect and report HIV testing and partner services to CDC.
Public Use Dataset	Is this data set available for public use	Not Available
Design	What are the data collection methods?	Captures National HIV Prevention Program Monitoring and Evaluation (NHME) HIV testing data. CDC requires the collection of client-level, session-level and aggregate level variables on all implemented activities, including HIV Testing and other HIV Prevention interventions.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	N/A
Frequency	How often is the data collected and when does data become available?	HIV Testing data is entered within 72 hours of intervention completion by grantees with Evaluation Web approval, or after the forms are received at the health department monthly. Data is available to CDC immediately but is pulled biannually.
Population (Units)	Who is represented in the data set?	Any person who accesses anonymous Counseling, Testing and Referral services. Any person who completes at least one session of an HIV prevention intervention.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County
Data Years	What year did data collection begin and what is the most current year available?	HIV Testing Data is available from 2008–Present
Strengths	What is the data useful for?	Provides data in real time upon entry. Integrated data analysis program (Reflex) allows for easy data extraction and analysis. Web-based interface allows for multiple approved users to utilize at any time.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results?	Not all program staff are e-authenticated to allow access to the data reporting sections of the program. This means there may be a lag in time between when activities occur and when they are entered.

	What biases exist?	
Indicators for Analysis	Which key indicators are collected in the data?	Demographic factors (age, sex, race/ethnicity, residence, risk factors for HIV infection), Diagnostic and treatment info (HIV testing earliest date, residence, provider, facility, continuation of care)
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex or Biological Sex, Gender or Gender Identity, Sexual Orientation, Race, Ethnicity
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Summary Reports, grant proposals, guide allocation of testing resources
Who Manages Data	Who is responsible for the data?	MSDH, Office of Communicable Diseases, STD/HIV Program
Funding Sponsor	Who funds the data collection?	CDC Division of HIV Prevention and Surveillance
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online form
To Learn More	Where to explore additional information?	HIV Planning Council - Mississippi State Department of Health (ms.gov)

Purpose	Please write one sentence describing the purpose of this survey.	The Mississippi Immunization Information exchange (MIIX) is a secure immunization information system (IIS) that contains immunization records for people living in Mississippi.
Public Use Dataset	Is this data set available for public use	Not Available - Individuals may request their own records, or the records of their children through MyIR Mobile .
Design	What are the data collection methods?	Registry Collection: About 70% is manually entered, and about 30% of the data is sent via a secure process directly from an electronic medical record. Follows national guidance regarding IIS standards pursuant to MS Code 41-88-3 .
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Cite the authority under which this collection of data was made and what the data retention period
Frequency	How often is the data collected and when does data become available?	New information is added in real time. Summary statistics are regularly provided to CDC as part of the grant requirements.
Population (Units)	Who is represented in the data set?	All people born in MS since 1996. Before 1996, proof of vaccination must be presented to any Health Department. Any individual that has had a vaccine in a MS hospital or provider practice.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County (82), Region (4), District (9) as of January 2024
Data Years	What year did data collection begin and what is the most current year available?	1996 - Present. Data from 1996 to the present is more comprehensive than prior years.
Strengths	What is the data useful for?	Help providers assess which immunizations have already been received, preventing unnecessary immunizations, and saving medical costs. Provides easy access to printable immunization records needed for school, work, etc. Allows school nurses to access immunization data directly. Allows doctors to assess their own immunization practices and assess vaccine coverage. Provides state and county level data for planning, evaluation, and outreach to underserved areas.
Limitations	What items may not be represented in the data? What	While most health care providers in Mississippi report immunizations to MIIX, a few do not. Some independent pharmacies and employee wellness clinics are not reporting to MIIX. MS requires all vaccines reported for individuals under 19 years of age.

	caution should be taken when looking at data results? What biases exist?	
Indicators for Analysis	Which key indicators are collected in the data?	Vaccination date, type, Lot numbers, Primary Practice, Demographics (age, gender, race/ethnicity) Vaccine master list
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex or Biological Sex, Race, Ethnicity
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Mississippi State Department of Health, Immunizations
Who Manages Data	Who is responsible for the data?	Mississippi State Department of Health, Office of Immunizations
Funding Sponsor	Who funds the data collection?	CDC via a grant to the Immunization Program at the Mississippi State Department of Health
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/msdhsite/_static/14,0,71,502.html

Emergency Department and Urgent Care Syndromic Surveillance – Bio Sense Platform

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	The BIOSENSE Platform stores syndromic surveillance data from Emergency Department and Urgent Care visits. The data is used to detect unusual trends and patterns of visits to determine whether a response is warranted and serve as an early warning system for public health concerns.
Public Use Dataset	Is this data set available for public use	Not Available
Design	What are the data collection methods?	Data are electronically submitted to MSDH. The format of the data adheres to the PHIN Syndromic Surveillance Messaging Guide HL7 standard. No data is manually entered. MSDH further de-identifies the data before forwarding all data to the CDC's Bio Sense Platform. MSDH can request data from Bio Sense for analytic purposes.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	This is a CMS Promoting Interoperability program requirement for Eligible Hospitals and Urgent Care settings. Please refer to Data Governance (Davy Trewola) for the data retention policy.
Frequency	How often is the data collected and when does data become available?	The system is updated daily and sometimes hourly.
Population (Units)	Who is represented in the data set?	All hospital emergency departments participate in sending. MSDH is planning to expand to at least five urgent care settings in 2024/2025.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County, Hospital, City, Zip Code
Data Years	What year did data collection begin and what is the most current year available?	2010 –2022 (YTD)
Strengths	What is the data useful for?	Cloud-based program that can be accessed from anywhere. Provides timely data on disease activity at Mississippi hospitals. Can detect unusual health events before traditional diagnostic methods.

Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Variability in chief complaint field. Instability of hospital feeds (not a stable denominator). No data on Mississippians who seek emergency care outside of MS. Data is de-identified so the use is limited to trends, etc.
Indicators for Analysis	Which key indicators are collected in the data?	Emergency Department visit date and hospital name; Number of ED visits for a given chief complaint or diagnosis; Patient age, Sex, Location, Race, Ethnicity
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex or Biological Sex, Race, Ethnicity,
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Enhanced State Opioid Overdose Surveillance grant reports.
Who Manages Data	Who is responsible for the data?	Mississippi Department of Health, Office of Communicable Diseases; National Syndromic Surveillance Program (NSSP)
Funding Sponsor	Who funds the data collection?	N/A
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online form
To Learn More	Where to explore additional information?	There is no further Information available at this time.

Ryan White AIDS Drugs Assistance Program (ADAP) Access Database and CAREWare

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	Collect and Report HIV Care (including VMAP) data to HRSA
Public Use Dataset	Is this data set available for public use	Not Available
Design	What are the data collection methods?	Eligibility applications, Medicaid pharmacy data.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Health Resources & Services Administration HRSA is our federal grantor for Ryan White Part B funding.
Frequency	How often is the data collected and when does data become available?	Data is updated daily, monthly, quarterly and annually. The data is available immediately.
Population (Units)	Who is represented in the data set?	The Ryan White AIDS Drug Assistance Program (ADAP) in Mississippi serves low-income, uninsured, or underinsured individuals living with HIV/AIDS.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County, Health District, Hospital Service Area
Data Years	What year did data collection begin and what is the most current year available?	2000–Present
Strengths	What is the data useful for?	HIV service (outpatient ambulatory, medical nutrition therapy, mental health, case management, dental, medication, housing) information in Mississippi.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Some of the dates are not real-time and is only updated monthly, quarterly and annually.

Indicators for Analysis	Which key indicators are collected in the data?	Demographic factors (age, sex, race/ethnicity, residence) for people receiving a care service listed above [strengths]; Medication Adherence info for Treatment Cascade; Service information related to outpatient ambulatory, medical nutrition therapy, mental health, medical case management, dental, medication adherence.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex or Biological Sex, Gender or Gender Identity, Immigration Status, Socioeconomic Status (Employment, Household Income), Language, Veteran/Military Status, Housing Status, Healthcare
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Ryan White Services Report (RSR) Ryan White Data Report (RDR) Comprehensive Integrated Plan for HIV Services and Prevention and Statewide Coordinated Statement of Need (SCSN).
Who Manages Data	Who is responsible for the data?	The Mississippi State Department of Health (MSDH) manages the data for the state, specifically through the Office of HIV/AIDS, which collects and reports HIV care data to HRSA.
Funding Sponsor	Who funds the data collection?	Health Resources and Services Administration (HRSA), HIV/AIDS Bureau, Ryan White Care Act
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online form
To Learn More	Where to explore additional information?	HIV Care and Treatment Program - Mississippi State Department of Health (ms.gov)

Patient Reporting Investigation Surveillance Manager (PRISM - STD)

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	Collect, investigate, and report STD data to CDC.
Public Use Dataset	Is this data set available for public use	Not available to public
Design	What are the data collection methods?	Chlamydia, gonorrhea, and syphilis are reportable infections. PRISM archives case report forms, lab results, risk profile, and treatment information for each reported case.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Mississippi is a dual reporting state provider and labs are required by law to report STI's gonorrhea, chlamydia, HIV, and syphilis.
Frequency	How often is the data collected and when does data become available?	Database is updated as labs/case report forms come in, several times a week and then as case investigators interview patients. Data is uploaded to CDC at the start of each week.
Population (Units)	Who is represented in the data set?	Any MS resident who is diagnosed with a reportable sexually transmitted infection (STI), regardless of state they are tested in.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County, City/Town
Data Years	What year did data collection begin and what is the most current year available?	1998–2018
Strengths	What is the data useful for?	Knowing the impacts of STI's in specific areas of the state and knowing how we compare overall to other states. This system is tailored specifically for STD monitoring and evaluating timeliness factors such as lab processing of specimens and timeliness of treatment.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results?	Can't modify the core database (have to contract with vendor – limits functionality)

	What biases exist?	
Indicators for Analysis	Which key indicators are collected in the data?	Demographic factors (age, sex, race/ethnicity, residence, sexual orientation); Diagnostic and treatment info (earliest date diagnosis, provider, facility, continuation of care); Information on risk behaviors; Sexually Transmitted Infection Information (chlamydia, gonorrhea, and syphilis)
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex or Biological Sex, Race, Ethnicity, Sexual Orientation, Address.
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	2022 Fact Sheet for Community Partners (rankings for congenital syphilis, gonorrhea, chlamydia (age, race, ethnicity, sex, geographical)
Who Manages Data	Who is responsible for the data?	Mississippi State Department of Health, Office of Communicable Diseases, STD/HIV program
Funding Sponsor	Who funds the data collection?	CDC Division of STD Prevention and Control
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/msdhsite/_static/14,13046,150.html

Purpose	Please write one sentence describing the purpose of this survey.	For the registration and preservation of vital events and statistics.
Public Use Dataset	Is this data set available for public use	Not Available
Design	What are the data collection methods?	Births and fetal deaths are reported via the Electronic Birth Registration System. Deaths are reported via the Electronic Death Registration System. Induced terminations are reported on forms by hospitals, physician offices, and clinics. Marriage certificates are registered in the issuing county, and counties send copies to the Vital Records Office. Divorce reports are received electronically from the Mississippi Electronic Court System.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Miss. Code Ann. §41-57-1 to §41-57-59; §93-5-33; §93-17-21; §93-17-201 to §93-17-223
Frequency	How often is the data collected and when does data become available?	Data is collected and updated daily. Final data sets are available within one year following completion of the calendar year.
Population (Units)	Who is represented in the data set?	All vital events occurring in Mississippi.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County, Health District, Hospital, City (for limited items)
Data Years	What year did data collection begin and what is the most current year available?	For statistical reporting: Births: 1980–Present; Deaths: 1980–Present; Induced Terminations and Fetal Deaths: 1980–Present; Marriages: 1980–Present; Divorces: 1980–Present. Historical aggregate reports available for prior years back to 1935.
Strengths	What is the data useful for?	Vital records are a census of all vital events occurring in the jurisdiction of Mississippi. Additional information is collected that can be used for analyses.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Data collection forms have changed over time; cause of death coding has changed over time; data is collected at the local level and data quality may vary

Indicators for Analysis	Which key indicators are collected in the data?	Births: demographics, characteristics of labor and delivery, risk factors of pregnancy, maternal morbidity, obstetric procedures, abnormal conditions of newborn. Deaths: demographics, underlying cause of death, significant conditions contributing to death
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex, Race, Ethnicity, Socioeconomic Status (Educational attainment, principal source of payment)
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	MSTAHRs - Mississippi Statistically Automated Health Resource System; Vital Statistics - Mississippi State Department of Health (ms.gov)
Who Manages Data	Who is responsible for the data?	Mississippi State Department of Health, Office of Vital Records and Public Health Statistics
Funding Sponsor	Who funds the data collection?	Fees for vital records certification and services
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/page/31.html

State Unintentional Drug Overdose Reporting System (SUDORS)

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	Understanding circumstances around accidental or undetermined overdose deaths
Public Use Dataset	Is this data set available for public use	Not Available
Design	What are the data collection methods?	Data abstraction of death certificates, medical examiner reports, law enforcement reports
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	The Centers for Disease Control (CDC). See CDC SUDORS Dashboard for unintentional and undetermined intent drug overdose deaths by states. The retention period is not specified or mandated. MSDH will maintain its SIDPRS data set throughout the 5-year grant period.
Frequency	How often is the data collected and when does data become available?	Data is collected semi-annually, with a complete dataset available in August of the following year.
Population (Units)	Who is represented in the data set?	All Mississippi accidental or undetermined overdose deaths
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County, town of occurrence and residence can be used for aggregating to larger geographies
Data Years	What year did data collection begin and what is the most current year available?	2019-2022
Strengths	What is the data useful for?	Understanding circumstances around accidental or undetermined overdose deaths
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results?	Some data reported comes from third-party documents, so the answers may be influenced by how well other individuals knew the decedent, what questions were asked of family, friends, and bystanders, and what was documented.

	What biases exist?	
Indicators for Analysis	Which key indicators are collected in the data?	Age, Sex or Biological Sex, Gender or Gender Identity, Sexual Orientation, Race, Ethnicity, Socioeconomic Status (Educational Attainment, Employment), Disability Status (Physical), Veteran/Military Status, Housing Status
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex or Biological Sex, Gender or Gender Identity, Sexual Orientation, Race, Ethnicity, Socioeconomic Status (Educational Attainment, Employment), Disability Status (Physical), Veteran/Military Status, Housing Status
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Which regular or large reports use this data aside from the documents we submit to the CDC? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found? <i>None at this time. In the future, these will be included on the MSDH website Reports and Data - Mississippi State Department of Health (ms.gov)</i>
Who Manages Data	Who is responsible for the data?	Mississippi State Department of Health, Pharmacy
Funding Sponsor	Who funds the data collection?	Centers for Disease Control
Data Request	Where to request the data from the agency (if not already available through the MSDH website)?	Submit your request through our online form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/page/44,0,382,740.html#overdose

MITI/YAHASOFT (EI/FIRST STEPS)

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	The Mississippi Infant & Toddler Intervention (MITI) Data System is used to collect, store and report data for infants and toddlers under three years of age who have a developmental delay, or who have a diagnosed condition that's likely to cause delays in development who is referred to the program and receives services based on the Individual Family Service Plan (IFSP).
Public Use Dataset	Is this data set available for public use	The data system is not available for public use
Design	What are the data collection methods?	Designed to meet the IDEA federal reporting standards. Data is collected from family, child assessments and the IFSP
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Code of Federal Regulations §303.124 Data Collection
Frequency	How often is the data collected and when does data become available?	The data system is a real-time data system.
Population (Units)	Who is represented in the data set?	Birth to the age of three
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	Statewide
Data Years	What year did data collection begin and what is the most current year available?	July 1, 2020, to present

Strengths	What is the data useful for?	The data system is available to EI providers
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	The IFSP is the only form that MITI can pre-populate.
Indicators for Analysis	Which key indicators are collected in the data?	The following indicators are collected in MITI: <ul style="list-style-type: none"> • Indicator 1: Timely Receipt of Services
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	See attached Health Equity Questionnaire
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Data from MITI is used for federal reporting of the State Performance Plan/Annual Performance Report (SPP/APR). Reports - Mississippi State Department of Health (ms.gov)
Who Manages Data	Who is responsible for the data?	Miranda Richardson is the Data Manger for the MITI Data System
Funding Sponsor	Who funds the data collection?	U.S. Department of Education - Office of Special Education
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online form
To Learn More	Where to explore more information	Early Intervention - Mississippi State Department of Health (ms.gov)

Naloxone Request Data

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	The purpose is to quantify the number of boxes of naloxone that have been distributed to Mississippians from the Mississippi State Department of Health Pharmacy through the online individual naloxone kit request form.
Public Use Dataset	Is this data set available for public use	Not available.
Design	What are the data collection methods?	Data is collected through an online REDCap survey. Individual kit requests are processed through the naloxone statewide standing order as individual prescriptions.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Substance Abuse and Mental Health Services Administration (SAMHSA). All REDCap requests are stored indefinitely in REDCap. Individual kit requests that are processed as individual prescriptions shall be retained for a minimum of 10 years as required by CMS for Medicare reimbursement.
Frequency	How often is the data collected and when does data become available?	Data is collected daily and is available as requests are submitted.
Population (Units)	Who is represented in the data set?	Individual Mississippians
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County, Public Safety District, and Zip Code.
Data Years	What year did data collection begin and what is the most current year available?	December 2022-present.
Strengths	What is the data useful for?	Determining the number of boxes of naloxone distributed through the MSDH Pharmacy and identifying areas of the state where naloxone distribution is more saturated.

Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	This data only reflects the number of boxes of naloxone distributed through the naloxone distribution program at the MSDH Pharmacy and does not include the number of boxes of naloxone distributed by other pharmacies or organizations. The major limitation is that the demographic data collected only reflects the naloxone recipient but does not reflect the end user (i.e., the person experiencing an opioid overdose). All data is self-reported.
Indicators for Analysis	Which key indicators are collected in the data?	Age, Gender, Race, Ethnicity, Insurance Status, Intended Use of Naloxone, Past IV Drug Use, Past SUD Treatment, Past Inpatient Treatment Within the Last 30 Days, Past Incarceration Within the Last 30 Days, Previous Drug Overdose, Replacement Dose Indication, Number of Times Overdose Witnessed, Number of Times Naloxone Administered.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Gender, Race, Ethnicity, Insurance Status, Past Incarceration Within the Last 30 Days.
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	<i>None at this time. In the future, these will be included on the MSDH website Reports and Data - Mississippi State Department of Health (ms.gov)</i>
Who Manages Data	Who is responsible for the data?	Mississippi State Department of Health Pharmacy
Funding Sponsor	Who funds the data collection?	Substance Abuse and Mental Health Services Administration (SAMHSA)
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online form
To Learn More	Where to explore more information	https://msdh.ms.gov/page/44,0,382,740.html

Medications for Substance Use Disorders (MSUD)

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	The purpose is to quantify the number of patients being treated for substance use disorders at the Mississippi State Department of Health.
Public Use Dataset	Is this data set available for public use	Not available
Design	What are the data collection methods?	Data is collected from the electronic health record, EPIC and the pharmacy dispensing system, QS1.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Substance Abuse and Mental Health Services Administration (SAMHSA). Prescriptions are retained for a minimum of 10 years as required by CMS for Medicare reimbursement.
Frequency	How often is the data collected and when does data become available?	Data is collected daily and is available as visits are completed in EPIC and prescriptions are processed in QS1.
Population (Units)	Who is represented in the data set?	Individuals receiving medications for substance use disorders (MSUD) at the Mississippi State Department of Health.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State and Public Health District
Data Years	What year did data collection begin and what is the most current year available?	November 2022-present
Strengths	What is the data useful for?	Identifying the number of patients treated for substance use disorders at the Mississippi State of Health and mapping available MSUD services.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	This information is protected by 42 CFR Part 2, which governs strict confidentiality protections for SUD treatment.
Indicators for Analysis	Which key indicators are collected in the data?	Age, Sex or Biological Sex, Gender or Gender Identity, Sexual Orientation, Race, Ethnicity, Number of Treatment Visits, MOUD prescription (drug, strength, quantity, day supply, directions)

Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex or Biological Sex, Gender or Gender Identity, Sexual Orientation, Race, Ethnicity
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc.
Who Manages Data	Who is responsible for the data?	Mississippi State Department of Health Opioid & Substance Use Program
Funding Sponsor	Who funds the data collection?	Substance Abuse and Mental Health Services Administration (SAMHSA)
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your requests from our online form
To Learn More	Where to explore additional information?	There is no further information available at this time.

Newborn Screening, Birth Defects, Hemoglobin/ Sickle Cell Disease and Critical Congenital Heart Defects



Purpose	Please write one sentence describing the purpose of this survey.	Newborn screening (NBS) data is used to track the total of newborns screened, to review trends and provide valuable feedback for continuous quality improvement and timely follow-up, and to identify number of conditions that receive referrals and diagnosis.
Public Use Dataset	Is this data set available for public use	Limited data is available on the MSDH website, and for future reporting with New Steps. Public data sets are requested electronic via the MSDH newborn screening website. Data Governance provides approval for any electronic request for data extractions from University of Mississippi Medical/EPIC. Newborn Screening and Genetic Services - Mississippi State Department of Health (ms.gov)
Design	What are the data collection methods?	Newborn Screening data is entered into the Revvity Omics data warehouse and data is transmitted to University of Mississippi Medical Center/EPIC. MSDH Genetics Bureau extracts available data to analyze, follow-up, and provide referrals internally and externally for further follow-up, counseling, diagnosis, and intervention and family centered care.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	MSDH Genetics Bureau partners/contracts with Revvity Omics, the designated state newborn screening testing and data entry and collection laboratory.
Frequency	How often is the data collected and when does data become available?	Within 24-48 hours all newborns screening bloodspot cards are properly processed and shipped. Depending on the testing outcome, data is available within 3-5 days. Continuous data is provided to MSDH Genetics Bureau. Immediate access is available through the Revvity Omics portal. Hospital performance is analyzed quarterly. Reporting is provided for continuous quality assurance and improvements.
Population (Units)	Who is represented in the data set?	Mississippi infants born in birthing hospitals and birthing facilities, including some out-of-state and transfer newborns.

Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State birthing hospitals, birthing facilities, and homebirths.
Data Years	What year did data collection begin and what is the most current year available?	MSDH newborn screening began in 2002. The conditions reported are based on the National RUSP. Data is available upon request and may be requested from EPIC and Revvity Omics.
Strengths	What is the data useful for?	Mississippi newborn screening data ensures that all newborns birthed in MS birthing hospitals and birthing facilities are tested for genetic, hemoglobin/Sickle cell, critical congenital heart defects, and birth defects. Continuous data analysis supports program accountability, and continuous quality assurance and improvements efforts. In addition, newborn screening data in comparison to other state data may be used in consortiums for opportunities in reporting, referrals, and follow-up improvements at regional and national levels.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	The database does not include all out-of-state births, transfers, and home births. Due to errors, some false positives and inconclusive and unacceptable cases and must undergo NBS follow-up. Therefore, actual diagnosed conditions are considerably smaller. Reporting time, excessive resources, and time for repeating newborn screening extends the time of receiving presumptive positive and diagnosed conditions.
Indicators for Analysis	Which key indicators are collected in the data?	Indicators for analysis consist of: newborns screened/ newborn births, newborns screened with presumptive positive, or disease diagnosis, broken down by birthing hospital and birthing facilities to include homebirths submitters. Several reports are available to include satisfactory and unsatisfactory specimens, missing data, diseased or presumptive cases, timeliness, etc.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Patient demographics: Race, Age, Sex, Socio-Economic Status.
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc.	Active episodes and EPIC clean-up reports are analyzed daily. Quarterly hospital reports are available for hospital performance reporting and to provide quality improvement intervention and corrective action planning. Hospital performance status is located on the Mississippi State Department of Health (MSDH) newborn

	Where on msdh.ms.gov can this data and these reports be found?	screening webpage. Annual NBS and hemoglobin/Sickle cell reports are found on the MSDH Newborn Screening webpage. Birth defects reports are required by the Center for Disease Control and Prevention (CDC) every other year and located on the National Birth Defects Registry website and published in the NBDR journal. Bi-annual reports are provided during Genetics Advisory Committee meetings providing NBS status. Yearly reports are provided for MCH Title V Block Grant reporting. Recently, the data agreement was updated to provide de-identified data with New Steps.
Who Manages Data	Who is responsible for the data?	Mississippi State Department of Health Genetics analyzes, reviews, and provides follow-up on the data. Revvity Omics records and transmits the data to University of Mississippi Medical Center EPIC who houses the newborn screening data.
Funding Sponsor	Who funds the data collection?	Mississippi State Department of Health- Genetics Bureau
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your requests from our online form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/page/41,0,285.html

Purpose	Please write one sentence describing the purpose of this survey.	Tracking and surveillance for newborn hearing screening, diagnosis of hearing loss and entrance into early intervention services
Public Use Dataset	Is this data set available for public use	Not Available
Design	What are the data collection methods?	Data Reporting is required by State Law. Hospitals, primary care providers, audiologists and early intervention providers submit data to MSDH. Birthing facilities submit data downloaded from hearing screening devices which are then matched to babies created from the Genetic Screening program in the Epic electronic medical record. Other hearing screening information as well as reports on diagnostic hearing testing is submitted, currently on paper, and transcribed into Epic.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Title 41 - Public Health Chapter 90 - Hearing Impairment of Infants and Toddlers § 41-90-1. Screening newborns for hearing impairment; notification of parents. All retain all records/data for 5 years.
Frequency	How often is the data collected and when does data become available?	Data is collected monthly. Dynamic reports are available to key stakeholders in Epic. Annual reporting is done to CDC and HRSA.
Population (Units)	Who is represented in the data set?	Infants birth to 3 years 364 days of age; [EHDI focuses on Birth to 36 months]; all infant data is collected to identify infants with hearing loss or risk of developing hearing loss.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State level Data only for public review.
Data Years	What year did data collection begin and what is the most current year available?	2021–2024 in Epic. We will report the 2023 Birth Cohort in December 2024.
Strengths	What is the data useful for?	Comparable to other states and territories. Tracks our progress in meeting national goals: screen hearing by 1 month of age, diagnose hearing loss by 3 months of age and entrance into early intervention by 6 months of age.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Small population of infants who are identified with hearing loss or potential for hearing loss; therefore, data cannot be broken down by county for diagnostic evaluations and entrance into early intervention services. This is a low incidence population and if broken down to the county level infants could be easily identifiable.

Indicators for Analysis	Which key indicators are collected in the data?	Hearing Screening by 1-month, Diagnostic Audiology by 3 months of age, and entrance into early intervention by 6 months of age.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex or Biological Sex, Race, Ethnicity
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	CDC Annual Report (CDC Website), Detailed reports available dynamically in Epic to MSDH Stake Holders Annual reports prepared at the state level are added to the MSDH website for public availability.
Who Manages Data	Who is responsible for the data?	Mississippi Department of Health, Division of Maternal Child Health; Children with Special Health Needs; Mississippi Early Hearing Detection and Intervention Program; MSDH Epic Support Staff
Funding Sponsor	Who funds the data collection?	Centers for Disease Control and Prevention HRSA
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/page/41,0,174.html

Newborn Screening (EPIC)

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	Data is used to maintain and improve key newborn screening quality indicators, and to identify the number of babies diagnosed with tested conditions.
Public Use Dataset	Is this data set available for public use	The program can provide some data sets upon request. Data may need to be suppressed for small numbers and confidentiality reasons.
Design	What are the data collection methods?	Registry/database with ability to run specific reports. All newborn screening specimens are entered into the Epic Medical Record.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Mississippi statute 41-21-201 requires the infants born in birth undergo newborn screening test(s) within 24-48 hours prior to hospital discharge. What is the data retention period? Currently records remain per EPIC.
Frequency	How often is the data collected and when does data become available?	Continuously. Newborn Screening results are interfaced directly into Epic as they are generated by the testing laboratory. Reports can be generated upon request.
Population (Units)	Who is represented in the data set?	All babies screened in Mississippi. Some babies screened in Mississippi may have been born out of state, and some babies born in Mississippi may be residents of other states. Health Departments of states cooperate in providing information on babies that are residents of other states.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, Birthing Hospitals and Midwifery Organizations.
Data Years	What year did data collection begin and what is the most current year available?	Mississippi Department of Health began storing newborn screening data in Epic in June or 2021. Reports are available beginning in 2021. Results prior to 2021 are in a separate database. Data available upon request from the screening laboratory.
Strengths	What is the data useful for?	Provides some insight into the epidemiology of rare conditions in Mississippi. It is used to make sure that all babies born in Mississippi receive newborn screening tests and for program quality improvement. Data can be compared to states with the same screening panel and screening requirements.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Database may not include information on Mississippi babies who were not screened in Mississippi (refusals, transfers). Through cooperation between state Health Departments, some Mississippi residents who are born out of state do have results entered Epic by nurses who receive the information from the other state. There are a fair number of false

		positive tests that resolve on repeat testing, so the number of diagnosed conditions is much smaller than what is flagged in the system. Each state determines its own screening panel and requirements so not all states are comparable.
Indicators for Analysis	Which key indicators are collected in the data?	Number of positive screens for a given condition. Number of screens performed, and number of babies screened. It can be broken down by hospital of birth. Various reports can be run such as the number of unsatisfactory specimens, timeliness, and others.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex or Biological Sex, Race, Ethnicity
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Hospitals receive monthly quality assurance (QA) reports from the testing Laboratory. The program generates an annual report.
Who Manages Data	Who is responsible for the data?	The MSDH Genetics Program manages the data, but it resides in the Epic electronic medical record provided to MSDH by the University of Mississippi Medical Center. It has been housed in the Epic database since 2021.
Funding Sponsor	Who funds the data collection?	The Mississippi Newborn Screening Program, but birthing hospitals are billed for the testing of babies born in their facility.
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/page/41,0,101.html

Sexually Transmitted Disease Management Information System (EPIC)

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	Collect all information related to the diagnosis and treatment of sexually transmitted infections and diseases performed in MSDH clinics.
Public Use Dataset	Is this data set available for public use	Not available to the public, but data reports can be produced upon request.
Design	What are the data collection methods?	MSDH clinics test for and treat all forms of STIs and STDs, including chlamydia, gonorrhea, syphilis, HIV/AIDS and others. Epic maintains all records related to care for patients in need of testing and/or treatment of these instances.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	(answer forthcoming)
Frequency	How often is the data collected and when does data become available?	Database is updated real time as patients are seen in clinic, with real time updating of information from the Epic Lab System on test results.
Population (Units)	Who is represented in the data set?	Any patient seen in an MSDH clinic who suspects or is diagnosed with a sexually transmitted infection (STI) or disease (STD).
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County, City/Town
Data Years	What year did data collection begin and what is the most current year available?	2018–present
Strengths	What is the data useful for?	Knowing the impacts of STI’s in specific areas of the state and knowing how we compare overall to other states. This system is tailored specifically for STD monitoring and evaluating timeliness factors such as lab processing of specimens and timeliness of treatment.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Information only relates to patients treated in MSDH clinics.

Indicators for Analysis	Which key indicators are collected in the data?	Demographic factors (age, sex, race/ethnicity, residence, sexual orientation); Diagnostic and treatment info; Information on risk behaviors; Sexually Transmitted Infection Information (chlamydia, gonorrhea, and syphilis, etc.)
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex or Biological Sex, Race, Ethnicity, Sexual Orientation
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Various summary reports related to numbers of tests and results are available on request. One MSDH Clinic is solely dedicated to the diagnosis and treatment of STIs, STDs, and HIV/AIDS; specific CDC reporting is required biannually of aggregate numbers broken down in multiple categories related to HIV/AIDS as well as MPOX vaccinations.
Who Manages Data	Who is responsible for the data?	Mississippi Department of Health Clinical Leadership MSDH Epic Support Staff
Funding Sponsor	Who funds the data collection?	CDC Division of STD Prevention and Control
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request from our online form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/page/14,0,150.html

Oral Health Screening (EPIC)

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	Responsible for the prevention and control of oral diseases through assessment, policy and program development, and assurance.
Public Use Dataset	Is this data set available for public use	Not available to the public, but data reports can be produced upon request.
Design	What are the data collection methods?	Referrals- MSDH clinics assess all patients seen related to oral health.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	(answer forthcoming)
Frequency	How often is the data collected and when does data become available?	Database is updated in real time as patients are seen in clinic.
Population (Units)	Who is represented in the data set?	Children, Adults, families and communities through MSDH partnerships with public health clinics, schools and approved dental health providers.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County, City/Town
Data Years	What year did data collection begin and what is the most current year available?	2020–Present
Strengths	What is the data useful for?	Information can be used to extrapolate the oral health status of Mississippi residents.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Information only relates to patients treated in MSDH clinics.
Indicators for Analysis	Which key indicators are collected in the data?	Demographic factors (age, sex, race/ethnicity, residence, sexual orientation)
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex or Biological Sex, Race, Ethnicity, County of residence

Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Various summary reports are available on request.
Who Manages Data	Who is responsible for the data?	Mississippi Department of Health Office of Oral Health MSDH Epic Support Staff
Funding Sponsor	Who funds the data collection?	Mississippi Department of Health
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request from our online form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/page/43,0,151.html

Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Program (EPIC)

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	To collect information on the development of children in Mississippi.
Public Use Dataset	Is this data set available for public use	Not Available
Design	What are the data collection methods?	Patient Care – manual entry of developmental screening results by MSDH staff as they see infants and children in clinic.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Mississippi Division of Medicaid
Frequency	How often is the data collected and when does data become available?	Data is collected ongoing and available immediately
Population (Units)	Who is represented in the data set?	Children who are eligible for Medicaid benefits up to age eight who have received screenings on development, autism, oral health, and/or Survey of Well-Being of Young Children in an MSDH clinic
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	Children across Mississippi come to a health department clinic for care.
Data Years	What year did data collection begin and what is the most current year available?	2018–Present from select county health departments
Strengths	What is the data useful for?	Comprehensive and accurate statewide source for developmental screening results
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Data is only gathered on children who are seen in one of the Mississippi Department of Health Clinics.

Indicators for Analysis	Which key indicators are collected in the data?	Developmental screening, behavioral screening, well-being screening, oral health screening, and autism screening data
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex or Biological Sex, Race, Ethnicity
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Reports of numbers of children seen and assessed aggregated by various categories and date ranges.
Who manages the data	Who is responsible for the data?	Mississippi Department of Health, Division of Maternal and Child Health, Mississippi Division of Medicaid
Funding Sponsor	Who funds the data collection?	Mississippi Department of Health, Division of Maternal and Child Health, Mississippi Division of Medicaid
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request from our online form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/page/41,0,164.html

Diabetes Educational Programs (DSMES and DPP)

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	To schedule and document information related to Diabetes education programs conducted by MSDH.
Public Use Dataset	Is this data set available for public use	Not Available
Design	What are the data collection methods?	Program management for diabetes education programs offered by MSDH – manual entry of student information and scheduling of classes by MSDH staff as new classes are started.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	(answer forthcoming)
Frequency	How often is the data collected and when does data become available?	Data is collected ongoing and available immediately
Population (Units)	Who is represented in the data set?	Mississippi residents who are at risk for or have been diagnosed with diabetes are eligible for education programs offered by MSDH, the Diabetes Prevention Program, and the Diabetes Management Education Program.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	Residents across Mississippi who attend Diabetes Education programs offered by MSDH.
Data Years	What year did data collection begin and what is the most current year available?	2021–Present
Strengths	What is the data useful for?	Allow tracking attendance and documenting progress achieved by attendees.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Data is the only gathered residents who attend Diabetes education classes offered by the Mississippi Department of Health.
Indicators for Analysis	Which key indicators are collected in the data?	Attendance and key factors at the beginning of the program to compare with those gathered post-attendance.

Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex or Biological Sex, Race, Ethnicity
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Reports on numbers of attendees. A comparison of information on students at the beginning and end of the classes is possible.
Who Manages Data	Who is responsible for the data?	Mississippi Department of Health, Division of Preventative Health, Diabetes Prevention and Control Program
Funding Sponsor	Who funds the data collection?	Mississippi Department of Health, Division of Preventative Health, Diabetes Prevention and Control Program
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your requests from our online form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/page/43,0,296.html

Purpose	Please write one sentence describing the purpose of this survey.	Healthy Moms and Healthy Babies of Mississippi is a care management and home visiting program for expectant moms and infants at risk for health problems. We work with families and communities to help provide a safe birthing experience and healthy infant development for Mississippi moms and babies
Public Use Dataset	Is this data set available for public use	No – only available for programmatic purposes and Department of Medicaid requirements for IAA agreement.
Design	What are the data collection methods?	Data abstraction of specific variables related to high-risk pregnant mothers’ birth history and postpartum journey and infants up to one year of age. Data is collected via EPIC and merged with nurse case management spreadsheets to complete reporting needs.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Mississippi Division of Medicaid
Frequency	How often is the data collected and when does data become available?	Monthly and Quarterly reports for participants enrolled within the previous month/quarter.
Population (Units)	Who is represented in the data set?	Expectant High-risk mothers and infants are at risk with health problems.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	Regional, County, and Health Department data
Data Years	What year did data collection begin and what is the most current year available?	February 2018 - current
Strengths	What is the data useful for?	Data is easily extracted using Smartsheet templates without manual data manipulation.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	As a public health entity and not a provider of obstetric care, a lot of data collected comes secondhand from the participant and is not always available prior to closure/withdrawal from the program.

Indicators for Analysis	Which key indicators are collected in the data?	Demographics, insurance information, geographical area, risks/needs, referrals to other public health programs/sources,
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex or Biological Sex, Race, Ethnicity, Sexual Orientation
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Mississippi Division of Medicaid, Health Mom Health Baby Program Leadership
Who Manages Data	Who is responsible for the data?	MSDH Epic, HMHB Program Leadership
Funding Sponsor	Who funds the data collection?	Mississippi Division of Medicaid
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your requests through our online form
To Learn more	Where to explore additional information?	https://msdh.ms.gov/page/41,0,106.html

Transportation Grant

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	Providing transportation to anyone who needs assistance getting to a county health department clinic or office for health services including prescription pick up and/or imaging.
Public Use Dataset	Is this data set available for public use	No – only available for MSDH staff and Office of Health Equity
Design	What are the data collection methods?	Surveillance and abstraction of patients requiring transportation to/from CHDs within Mississippi.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Transportation Grant amongst MSDH and Rideshare program
Frequency	How often is the data collected and when does data become available?	Appointments are scheduled on an as needed basis and data is provided to the Office of Health Equity to schedule transportation with ride share. Reports are published monthly for those who require transportation and the status of the appointment.
Population (Units)	Who is represented in the data set?	Adults at least 18 years of age visit a CHD, office for health services, and/or WIC appointment
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	Regional, County, and Health Department data
Data Years	What year did data collection begin and what is the most current year available?	November 2023 - current
Strengths	What is the data useful for?	The data is used to provide an overview of the transportation needs within the state of Mississippi.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Limitations include only having data for individuals who answered positively about needing transportation. Not reflective of entire population.
Indicators for Analysis	Which key indicators are collected in the data?	Geographic area, Question regarding need for transportation, Appointment status if transportation requested.

Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Social determinants of health – specifically food, transportation, housing in relation to transportation needs having effects on other components.
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	The Office of Health Equity uses data for reporting grant usage of funds to Rideshare program.
Who Manages Data	Who is responsible for the data?	MSDH EPIC/ Office of Health Data Equity
Funding Sponsor	Who funds the data collection?	Grant from Office of Health Equity
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your requests through our online Form
To Learn More	Where to explore additional information?	There is no further information available at this time.

Family Planning

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	A program providing a wide range of planning and reproductive health services statewide to both men and women at our county health departments
Public Use Dataset	Is this data set available for public use	Not Available
Design	What are the data collection methods?	Family planning-related services are tracked, reported, and surveyed within our electronic health record for individuals who meet certain qualifications including insurance requirements.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Mississippi Division of Medicaid, Division of Medicaid Family Planning Waiver
Frequency	How often is the data collected and when does data become available?	Appointments are scheduled on an as needed basis and data is provided to the Division of Mississippi Medicaid if patients qualify for a family planning waiver.
Population (Units)	Who is represented in the data set?	Men or women meeting certain requirements and needing annual medical exams, family planning counseling and education, contraception, STD/HIV testing, preconception counseling, and/or patient navigation for high-risk clients
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	Regional, County, and Health Department data
Data Years	What year did data collection begin and what is the most current year available?	November 2023 - current
Strengths	What is the data useful for?	The data is used to provide an overview of the transportation needs within the state of Mississippi.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Limitations include only having data for individuals who answered positively about needing transportation. Not reflective of entire population.
Indicators for Analysis	Which key indicators are collected in the data?	Geographic area, Question regarding need for transportation, Appointment status if transportation requested.

Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Social determinants of health – specifically food, transportation, housing in relation to transportation needs having effects on other components.
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	The Office of Health Equity uses data for reporting grant usage of funds to Rideshare program.
Who Manages Data	Who is responsible for the data?	MSDH EPIC/ Office of Health Data Equity
Funding Sponsor	Who funds the data collection?	Grant from Office of Health Equity
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your requests through our online Form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/page/41,0,107.html

MCH Block Grant Reporting

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	Extensive data reporting is required annually to meet Title V Maternal and Child Health Services Block Grant requirements.
Public Use Dataset	Is this data set available for public use	Not Available
Design	What are the data collection methods?	Program management for diabetes education programs offered by MSDH – manual entry of student information and scheduling of classes by MSDH staff as new classes are started.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Health Resources and Service Administration (HRSA)
Frequency	How often is the data collected and when does data become available?	Data is collected real-time as patients are seen, and reports run annually in response to grant requirements.
Population (Units)	Who is represented in the data set?	All patients receiving care in MSDH clinics covered by Title V funds.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	States, Counties
Data Years	What year did data collection begin and what is the most current year available?	2021–Present
Strengths	What is the data useful for?	With more programs housed in Epic, more of the Block Grant report/application can be completed with data from Epic.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Data is only gathered for those with a documented MSDH clinic visit.

Indicators for Analysis	Which key indicators are collected in the data?	Each report has various indicators for analysis.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex or Biological Sex, Race, Ethnicity
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Genetics Confirmed Conditions; Newborn Screening Results with Presumptive Positive results; Newborn Screening Results with any abnormal results; Babies born during the defined period with confirmed hearing loss; Reporting related to Women seen in clinic who want to become pregnant in the next year; EPSDT encounters; Encounters with Dental Screenings; All Encounters data; All Family Planning encounters; All STD/HIV encounters; Patients with active CYSHCN episodes
Who Manages Data	Who is responsible for the data?	Mississippi Department of Health, Division of Health Services
Funding Sponsor	Who funds the data collection?	Title V Maternal and Child Health Services Block Grant
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your requests from our online Form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/page/44,0,407,1017.html

Children and Youth with Special Healthcare Needs (CYSHCN) (EPIC)

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	Tracking and case management for children and youth with special healthcare needs to ensure they get appropriate support, and their healthcare needs are met by referrals to various resources including referral to early intervention services when appropriate.
Public Use Dataset	Is this data set available for public use	Not Available
Design	What are the data collection methods?	The CYSHCN program is for children and youth who have or are at increased risk of having chronic physical, developmental, behavioral or emotional conditions. It provides assistance up to the age of 21. Children may be referred to CYSHCN by hospitals and providers as well as other MSDH programs. CYSHCN case managers track their contacts with clients, provide resources to the client for various needs and follow-up to determine if resources are used and effective.
Authority of Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Mississippi State Department of Health
Frequency	How often is the data collected and when does data become available?	Data is collected as contacts are made. Reports are available internally upon request.
Population (Units)	Who is represented in the data set?	Children and youth up to age 21 with special healthcare needs.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State level data only for public review.
Data Years	What year did data collection begin and what is the most current year available?	2022–2024 in Epic
Strengths	What is the data useful for?	Comparable numbers to other states and territories.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Only includes children and youth whose families accept the services.

Indicators for Analysis	Which key indicators are collected in the data?	Frequency of contacts made to clients by individual Case Managers if documented properly.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex or Biological Sex, Race, Ethnicity, geographic
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Currently just reporting for Case Managers to manage clients. Other reporting is available on request.
Who Manages Data	Who is responsible for the data?	Mississippi Department of Health, Division of Maternal Child Health. Children with Special Health Needs MSDH Epic Support Staff
Funding Sponsor	Who funds the data collection?	(answer forthcoming)
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your requests through our online Form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/page/41,0,163.html

Telehealth (EPIC)

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	Provide capabilities for MSDH public health providers to examine and treat patients remotely, in real time, using online streaming video technology and interactive tools.
Public Use Dataset	Is this data set available for public use	Not Available
Design	What are the data collection methods?	Monthly reports are generated to determine high need areas, patient demographics, etc. Telehealth services was opened in a step wise pivot to allow for training and equipment as needed.
Authority of Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Mississippi State Department of Health.
Frequency	How often is the data collected and when does data become available?	Reports are pulled monthly to demonstrate the TH appointments including patient demographics, geographical locations, and reasons for visits.
Population (Units)	Who is represented in the data set?	All telehealth encounters within the MSDH statewide health departments
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State level data
Data Years	What year did data collection begin and what is the most current year available?	April 2023 - Current
Strengths	What is the data useful for?	Recurrent processing of regularly producing detailed reports of an organization's day-to-day operations and activities.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Data is not the most inclusive for drilling down to specific granularities.
Indicators for Analysis	Which key indicators are collected in the data?	Frequency of contacts made to clients by individual Case Managers if documented properly.

Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Region, District, County
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Provides adjunct reports as needed for board meetings, presentations, etc.
Who Manages Data	Who is responsible for the data?	Mississippi Department of Health
Funding Sponsor	Who funds the data collection?	MSDH Health Data and Operations
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your requests through our online Form
To Learn More	Where to explore additional information?	There is no further information available at this time.

Ambulatory and Revenue Operational Reports (EPIC)

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	Provide ambulatory and operational reports for the agency looking at a statewide level for decision making for senior leadership.
Public Use Dataset	Is this data set available for public use	Not Available
Design	What are the data collection methods?	The reports are created in Tableau for an interactive integrative approach to meet the different layering needs of leadership.
Authority of Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Mississippi State Department of Health
Frequency	How often is the data collected and when does data become available?	Data is constantly linked to a SQL server and updated monthly into a shared Teams site.
Population (Units)	Who is represented in the data set?	All encounters within the MSDH statewide health departments
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State level data
Data Years	What year did data collection begin and what is the most current year available?	2022–2024 in Epic
Strengths	What is the data useful for?	Recurrent processing of regularly producing detailed reports of an organization's day-to-day operations and activities.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Data is not the most inclusive for drilling down to specific granularities.
Indicators for Analysis	Which key indicators are collected in the data?	Frequency of contacts made to clients by individual Case Managers if documented properly.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Region, District, County
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc.	Provides adjunct reports as needed for board meetings, presentations, etc.

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	Where on msdh.ms.gov can this data and these reports be found?	
Who Manages Data	Who is responsible for the data?	Mississippi Department of Health
Funding Sponsor	Who funds the data collection?	MSDH Health Data and Operations
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
How to Learn More	Where to explore additional information?	There is no further information available at this time.

Screening, Brief Intervention, and Referral to Treatment for Substance Use Disorder (MSUD/SBIRT) – (EPIC)



Purpose	Please write one sentence describing the purpose of this survey.	Collect all information related to the diagnosis and treatment of substance use disorders performed in MSDH clinics
Public Use Dataset	Is this data set available for public use	Not Available for public use, but data is provided internally for program management and grant requests.
Design	What are the data collection methods?	MSDH clinics screen patients annually related to their alcohol and drug use. Depending on answers to the screening, questions, educational resources and/or treatment may be suggested for the patient. Epic maintains all records related to care for patients. Patients may be referred to as a UMC provider for Behavioral treatment tor if appropriate and desired by the patient to an MSDH provider for treatment of a substance use disorder.
Authority of Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Mississippi State Department of Health
Frequency	How often is the data collected and when does data become available?	Database is updated real time as patients are seen in clinic or through telehealth with updating of information from the EPIC lab system on test results.
Population (Units)	Who is represented in the data set?	All encounters within the MSDH statewide health departments who choose to answer SBIRT/DAST screening questionnaires.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County
Data Years	What year did data collection begin and what is the most current year available?	2023 - present
Strengths	What is the data useful for?	Substance use disorders are a prevalent problem nationwide. This system is tailored to identify patients who could be helped through education and/or treatment.

Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Information only on patients actively seen in an MSDH clinic with completed questionnaires.
Indicators for Analysis	Which key indicators are collected in the data?	Demographic factors (age, sex, race, ethnicity, sexual orientation); diagnostic treatment information, Screening numbers, referral numbers, and range of screening scores.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, sex, race, ethnicity, sexual orientation
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Various summary reports related to numbers screened and spread scores as well as numbers accepting treatment options.
Who Manages Data	Who is responsible for the data?	Mississippi Department of Health
Funding Sponsor	Who funds the data collection?	MSDH Health Data and Operations
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To Learn More	Where to explore additional information?	There is no further information available at this time.

MS Sample Notice System (Sample Reporting)

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	This sample reporting application allows the system to check and verify the status of all recently collected bacteriological samples for public water systems based on their PWS IDs.
Public Use Dataset	Is this data set available for public use	The data would be available for public use but the URL for access is not readily advertised for the public to utilize.
Design	What are the data collection methods?	Data is collected based on water quality analysis performed by the MPHL. Data is put into a format that can be viewed by the operating community at a time of their choosing.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	The Department has the authority to collect and maintain this data as a condition of maintaining primacy over the oversight and implementation of the SDWA in accordance with the Mississippi Safe Drinking Water Act – MS Code 41-6-6. The Environmental Protection Agency grants MSDH this authority. 10 years required. Historical data is available further back through Drinking Water Watch. This application presents the information within the most recent 60 days.
Frequency	How often is the data collected and when does data become available?	Ongoing collection and reporting.
Population (Units)	Who is represented in the data set?	Who is represented in the data set? Based on the system PWS ID, samples collected from that specific water system.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	This would be a public water system specifically based on a specific ID.
Data Years	What year did data collection begin and what is the most current year available?	Water quality analysis data is digitally available back to 2002. As this is an environmental program, collection and reporting of data is ongoing. Data is updated routinely.

Strengths	What is the data useful for?	To determine that all samples are collected in accordance with the Revised Total Coliform Rule; Verify that samples are clear and are absent of coliform and E. coli.; Allow for BWN sample tracking.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Data is collected for a specific purpose related to compliance.
Indicators for Analysis	Which key indicators are collected in the data?	It is a report out to system operators and officials of samples that they previously collected. Samples are either indicate a presence or absence of contamination.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	N/A
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	No regular reports use this data. This information is supplied for quick review. Substantial information is available to the system via the security portal.
Who Manages Data	Who is responsible for the data?	MPHL and the Bureau
Funding Sponsor	Who funds the data collection?	EPA through existing ongoing grants.
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To Learn More	Where to explore additional information?	There is no further information available at this time.

Safe Drinking Water Information System (SDWIS)

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	Safe Drinking Water Information System (SDWIS) – data system/Application that maintains water quality and sanitary survey data for the state’s public water systems.
Public Use Dataset	Is this data set available for public use	Yes, Water quality analysis data is accessible through a web interface called “Drinking Water Watch” for any individual who wants public water system information concerning the water quality. Data can and has been routinely requested through public records requests in addition to results from sanitary surveys conducted by the field staff
Design	What are the data collection methods?	Water quality samples are collected by the public water systems in the state, samples are then analyzed for various potential contaminants either by the Mississippi Public Health Laboratory or by contract laboratory. The resulting data is then transmitted electronically into SDWIS where it is used to determine compliance with the Safe Drinking Water Act (SDWA).
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	The Department has the authority to collect and maintain this data as a condition of maintaining primacy over the oversight and implementation of the SDWA in accordance with the Mississippi Safe Drinking Water Act. The Environmental Protection Agency grants MSDH this authority.
Frequency	How often is the data collected and when does data become available?	Data is collected routinely throughout the year. Samples for drinking water analytes can occur monthly, quarterly, biannually, annually, and triennially based on system size and treatment type. Data is usually available within 30 days of analysis. Inspection/Sanitary Survey information is collected annually and triennially.
Population (Units)	Who is represented in the data set?	The data is representative of public water systems all over the state.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	Public Water systems are identified based on their public water system identification number. This is a county-based system, beginning with 01-Adams to 82-Yazoo. The 82 counties are subdivided into 10 geographical regions.

Data Years	What year did data collection begin and what is the most current year available?	Since the early 80's. The transition to the current version of SDWIS occurred in the 90's. Data collection is an ongoing occurrence.
Strengths	What is the data useful for?	Determining a public water system compliance with the various rules and provisions of the SDWA such as the Lead and Copper Rule, Disinfection By-Products Rule, and the Revised Total Coliform Rule.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Data can be statistically representative of the public water system and in many cases is a "snapshot" in time of the conditions of the system at that specific moment in time. Data collection is not continuously recorded. Samples with less than desirable results may require additional validation. They can also lead to specific actions that may be taken to "return the system back to compliance" such as administrative hearings and orders. Systems that are not in compliance can create public concerns. The analysis performed by the MPHIL, or private laboratory do not have biases that would be concerning Data is a function of the laboratory analysis and methods utilized.
Indicators for Analysis	Which key indicators are collected in the data?	Concentration of analytes, unit of measure, location of collection, type of sample.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Annual reports, data briefs, legislative reports, etc. Data must be routinely transmitted to the EPA in the form of system specific data, statewide data of compliance. Information is also used in annual legislative performance measures reporting.
Who Manages Data	Who is responsible for the data?	The Bureau of Public Water Supply staff and contract workers
Funding Sponsor	Who funds the data collection?	Funding for the program occurs through the collection of water quality analysis fees, and two EPA grants

Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your requests through our online Form
To Learn More	Where to explore additional information?	Drinking Water Watch - Mississippi State Department of Health (ms.gov)

Infrastructure Finance Software for the Drinking Water State Revolving Loan Fund (IFS)

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	Drinking Water State Revolving Loan Fund is a program that handles substantial financial resources to fund infrastructure drinking water improvements for the state’s public water systems that are eligible to receive funding in the form of either a loan or grant. This software application allows for financial tracking of loans and grants and the associated EPA grants, State match, fees and repayments.
Public Use Dataset	Is this data set available for public use	Information housed in this financial data application is not available to the public. On occasion financial information may be transmitted via a public records request.
Design	What are the data collection methods?	As this is financial information regarding specific systems once they pursue a loan/grant, information is provided mostly by a public water system. Loan award information is offered by the staff that manage the program.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Miss. Code Ann. § 41-3-16
Frequency	How often is the data collected and when does data become available?	Data is collected routinely throughout the year as awards can occur throughout the year. Within the program, in addition to loan awards, the program processes payment requests for the disbursement of funds to specific water systems monthly. Program also must process loan repayments from previously awarded public water systems.
Population (Units)	Who is represented in the data set?	The data is representative of public water systems all over the state that have pursued loan and grant funding.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	Public Water systems are identified based on their public water system identification number. This is a county-based system, beginning with 01-Adams to 82-Yazoo. The 82 counties are subdivided into 10 geographical regions.
Data Years	What year did data collection begin and what is the most current year available?	Program began in 1997. Data collection is an ongoing occurrence.

Strengths	What is the data useful for?	Identification of where prior loans have been awarded and where potential loans will be awarded at a county, regional (BPWS regions), state legislative, or congressional level
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Situations where water systems chose to delay or pursue funding from a different financial lender or federal entity. System only tracks systems that choose to pursue funding through the program.
Indicators for Analysis	Which key indicators are collected in the data?	Loan terms, grant terms, principal forgiveness, responsible contacts of the system, their consulting engineer, and loan project elements.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	I do not apply.
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Annual reports, data briefs, legislative reports, etc. Data must be routinely transmitted to the EPA in the form of system specific data and association loan/grant terms. Information is also used in annual legislative performance measures reporting.
Who Manages Data	Who is responsible for the data?	The Bureau of Public Water Supply staff in the DWSRF Program.
Funding Sponsor	Who funds the data collection?	Funding for the program occurs through the collection of assessed loan administrative fees and EPA grants.
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To Learn More	Where to explore additional information?	Drinking Water Loan Fund - Mississippi State Department of Health (ms.gov)

Purpose	Please write one sentence describing the purpose of this survey.	EMTrack, is a patient and population tracking solution and provides users with a platform for tracking patients, evacuees, and general population movement during a crisis, large scale public event, or daily patient transport.
Public Use Dataset	Is this data set available for public use	Not available for public use. The system is available to healthcare providers, EMS agencies and local, state and federal response partners.
Design	What are the data collection methods?	Registries and surveillance system. EMTrack is a secure, web-based HIPAA compliant system hosted by the software vendor, Juvare. It consists of real-time patient data entered by EMS and Healthcare providers. EMTrack includes functionalities for inbound patient coordination and can notify hospitals in advance to prepare for high-risk patients as well as proactively alert staff, reserve treatment rooms, and mobilize resources. The database contains data collection, storage, extraction and analytical capabilities.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	The authority for the collection of data should be listed as being held by the Mississippi State Department of Health (MSDH) , specifically through the Division of Strategic Planning & Response. As far as data retention is concerned, all data entered the system is available for the life of the product.
Frequency	How often is the data collected and when does data become available?	Data collected in real-time and available immediately.
Population (Units)	Who is represented in the data set?	Any patient receiving pre-hospital, emergency medical care by a Mississippi licensed ambulance agency and/or licensed healthcare facility. Records are patient and incident specific.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	Incident location type, street address, city, county, zip code, state.
Data Years	What year did data collection begin and what is the most current year available?	2024 to present.
Strengths	What is the data useful for?	EMTrack supports capturing data online, offline, and via mobile devices. Users can use mobile phones to scan-in patients on-scene and track through triage,

		treatment, transfer, and hospital reception. Real-time data; applicable to a variety of public health analyses; can be utilized for planned and unplanned events such as MCI, activation of SMNS, exercises and sporting events. Comparable to other states and national prehospital emergency medical services data.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Dependent on EMS and health care provider data collection; detailed patient info may be documented in narrative as free text rather than as extractable national and state defined data components; patient narrative data are not routinely incorporated in analysis. First Response agencies are not required to report.
Indicators for Analysis	Which key indicators are collected in the data?	Medical events, trauma/injury data, prehospital interventions (medications administered, procedures performed), EMS protocols.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Gender, Race, Ethnicity, Disability Status
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	https://www.login.juware.com
Who Manages Data	Who is responsible for the data?	Data hosted and stored through software vendor Juvare. Data system managed by the ESF8 Data Analyst in SPR at MSDH.
Funding Sponsor	Who funds the data collection?	PHEP / HPP
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To Learn More	Where to explore additional information?	There is no further information available at this time.

Purpose	Please write one sentence describing the purpose of this survey.	eICS is a web-based incident command platform that offers organizations the ability to plan and respond to emergencies at any level, from those affecting a single facility, site, or business unit, to those affecting an entire organization or enterprise.
Public Use Dataset	Is this data set available for public use	Not available for public use. The system is available to healthcare providers, EMS agencies and local, state and federal response partners.
Design	What are the data collection methods?	eICS automates common workflows, such as form and report generation, including fully HSEEP-compliant After-Action-Reporting. eICS is designed using best practices and supports the ICS Standard and enables the National Response Framework.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	The authority for the collection of data should be listed as being held by the Mississippi State Department of Health (MSDH) , specifically through the Division of Strategic Planning & Response. As far as data retention is concerned, all data entered systems are available for the life of the product.
Frequency	How often is the data collected and when does data become available?	Data collected in real-time and available immediately.
Population (Units)	Who is represented in the data set?	Licensed healthcare facilities statewide; local, state and regional emergency response agencies and partners
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	Incident location type, street address, city, county, zip code, state.
Data Years	What year did data collection begin and what is the most current year available?	2024 to present.
Strengths	What is the data useful for?	eICS enables horizontal and vertical communication and collaboration to support response efforts. Users can complete guided risk, business impact, and hazard vulnerability assessments, monitoring changes and outcomes over time. Develop plans tailored to risks and threats and incorporate project

		management workflows to facilitate and improve future performance based on previous outcomes.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Dependent on healthcare provider data collection; Incident information is limited to healthcare facilities registered and actively using the system; Facilities are not required to utilize eICS.
Indicators for Analysis	Which key indicators are collected in the data?	Local, state or regional declared disaster affecting public health or healthcare facility, Activation of ESF8 Public Health Command or healthcare facility EOP; Documentation of exercises or drills.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	none
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	https://www.login.juware.com
Who Manages Data	Who is responsible for the data?	Data hosted and stored through software vendor Juvare. Data system managed by the ESF8 Data Analyst in SPR at MSDH.
Funding Sponsor	Who funds the data collection?	PHEP / HPP
Data Request	Where to request the data from the agency (if not already available through the MSDH website)?	Submit your request through our online Form
To Learn More	Where to explore additional Information?	There is no further information available at this time.

National Cardiovascular Data Registry (NCDR)- Chest Pain- Myocardial Infarction (MI) registry

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	To represent quarterly and cumulative submissions of Mississippi STEMI data in the registry.
Public Use Dataset	Is this data set available for public use	Not available.
Design	What are the data collection methods?	Gain insights through a risk-adjusted, outcomes-based quality improvement program for all patients with chest pain using reliable, audited data captured.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Cite the authority under which this collection of data was made and what the data retention period
Frequency	How often is the data collected and when does data become available?	Data is updated quarterly.
Population (Units)	Who is represented in the data set?	All patients who have received comprehensive Acute Myocardial Infarction care.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	Reports are only produced at a state level from hospitals participating in the NCDR Chest Pain-MI registry.
Data Years	What year did data collection begin and what is the most current year available?	2011- Present
Strengths	What is the data useful for?	Gives the ability to identify trends and monitor stroke care performance across the state.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Not all metrics can be drilled down to specific patient data. If there are data input discrepancies, data will appear skewed until the following quarter of being corrected.
Indicators for Analysis	Which key indicators are collected in the data?	Key metrics are chosen to monitor performance, establish goals, and monitor progress toward those goals.

Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Location: Are STEMI patients receiving the best possible care across Mississippi?
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Chest Pain MI Registry (acc.org) , STEMI Performance Improvement Committee report, Stroke Advisory Committee report
Who Manages Data	Who is responsible for the data?	MSDH Office of Emergency Medical Services and Acute Care Systems
Funding Sponsor	Who funds the data collection?	MS Tobacco Funds – Legislative appropriation to MSDH as pass through funds to the Mississippi Healthcare Alliance
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/page/43,0,297.html

Get With the Guidelines – Stroke Registry

S RSS

Purpose	Please write one sentence describing the purpose of this survey.	To represent quarterly and cumulative submissions of Mississippi Stroke data in the registry.
Public Use Dataset	Is this data set available for public use	Not available.
Design	What are the data collection methods?	Gain insights through a risk-adjusted, outcomes-based quality improvement program for all patients with stroke using reliable, audited data captured.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	(answer forthcoming)
Frequency	How often is the data collected and when does data become available?	Data is updated quarterly.
Population (Units)	Who is represented in the data set?	All patients who have received comprehensive Stroke care.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	Reports are only produced at a state level from hospitals participating in the GWTG Stroke registry.
Data Years	What year did data collection begin and what is the most current year available?	2013- Present
Strengths	What is the data useful for?	Gives the ability to identify trends and monitor stroke care performance across the state.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Not all metrics can be drilled down to specific patient data. If there are data input discrepancies, data will appear skewed until corrected the following quarter.
Indicators for Analysis	Which key indicators are collected in the data?	Key metrics are chosen to monitor performance, establish goals, and monitor progress toward those goals.

Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	None
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Stroke Performance Improvement Committee report, Stroke Advisory Committee report
Who Manages Data	Who is responsible for the data?	MSDH Office of Emergency Medical Services and Acute Care Systems
Funding Sponsor	Who funds the data collection?	MS Tobacco Funds – Legislative appropriation to MSDH as pass through funds to the Mississippi Healthcare Alliance
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To Learn More	Where to explore additional information?	There is no further information available at this time.

EMS Information System		S RSS
Purpose	Please write one sentence describing the purpose of this survey.	Image Trend is the data collection system used to improve pre-hospital care through the standardization, aggregation, and utilization of point-of-care EMS data at the local and state level which is then pushed to the national level.

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Public Use Dataset	Is this data set available for public use	Certain data can be requested through MSDH’s Public Records Request process.
Design	What are the data collection methods?	All licensed ambulance services operating in MS must submit electronically the MS minimum data set and/or information contained on the form for each ambulance run and/or for each patient transported.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Miss. Code Ann. § 41-59-5 (2)
Frequency	How often is the data collected and when does data become available?	All Mississippi minimum EMS data set information is due within fourteen days to the Office of EMS and Acute Care Systems (OEMSACS).
Population (Units)	Who is represented in the data set?	Anyone receiving emergency medical services within the boundaries of Mississippi.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County, Health District, Hospital Service Area? State, County, City, EMS District
Data Years	What year did data collection begin and what is the most current year available?	Mississippi established the first Mississippi EMS Information System (MEMSIS) in 1992, collecting data from every EMS response and sending required data elements electronically to the National EMS repository. The data is available 24 - 48 hours of collection.
Strengths	What is the data useful for?	This data is used in coordination with trauma registry data to drive performance improvement initiatives and accurately assess EMS needs. This data is used to hold services accountable to ensure patient care meets the minimum national scope of practice.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Incorrect information entered or information not provided by individual services.

Indicators for Analysis	Which key indicators are collected in the data?	Patient demographic information, patient care related to the call, transfer information, dispatch data and patient disposition.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	N/A
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	Legislative reports, MS EMS Advisory Council, MS Trauma Advisory Council, MS State Traffic Records Coordinator Committee, National Emergency Medical Services Information System
Who Manages Data	Who is responsible for the data?	MSDH Office of Emergency Medical Services and Acute Care Systems
Funding Sponsor	Who funds the data collection?	EMS Licensure Fees
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To Learn More	Where to explore additional information?	MEMSIS - Mississippi State Department of Health

Claims and Discharge Data



Claims and Discharge Data Template

CDD

Purpose

Please write one sentence describing the purpose of this data source.

Public Use Dataset

Is this data set available for public use?

Design

What are the data collection methods?

Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.
Frequency	How often is the data collected and when does data become available?
Population (Units)	Who is represented in the data set?
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?
Data Years	What year did data collection begin and what is the most current year available?
Strengths	What is the data useful for?
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?
Indicators for Analysis	Which key indicators are collected in the data?
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?
Who Manages Data	Who is responsible for the data?
Funding Sponsor	Who funds the data collection?
Data Request	Where to request the data from the agency (if not already available through the MSDH website)
To Learn More	Where to explore additional information?

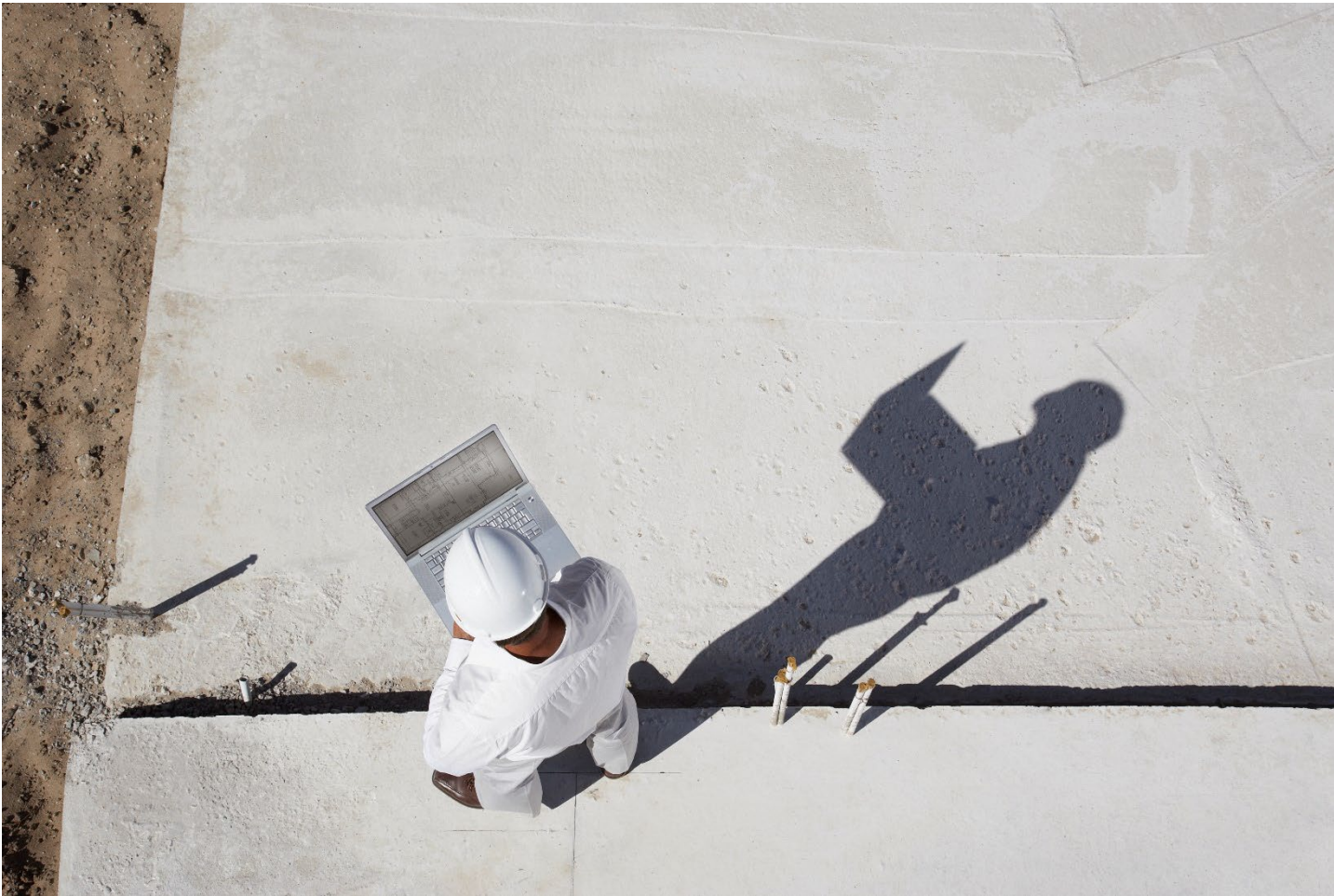
MSDH – Mississippi Healthcare Data Registry System

CDD

Purpose	Please write one sentence describing the purpose of this data source.	For a registry concerning the condition and treatment of people seeking inpatient and outpatient medical care in the state of Mississippi.
Public Use Dataset	Is this data set available for public use?	Not Available
Design	What are the data collection methods?	Data include all discharges submitted by Mississippi hospitals to the Mississippi Hospital Association – Inpatient Outpatient Data System (IODS), which then delivers the data to the Mississippi State Department of Health.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Miss. Code Ann. §41-63-4
Frequency	How often is the data collected and when does data become available?	Data is collected and updated quarterly. Final data sets are available within 6-8 months following completion of the calendar year.
Population (Units)	Who is represented in the data set?	All hospital discharges (inpatient and outpatient) occurring in Mississippi in non-federal or tribal facilities
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County, Health District, Hospital, Zip Code (for limited items)
Data Years	What year did data collection begin and what is the most current year available?	2013-Present
Strengths	What is the data useful for?	Includes all Mississippi-occurring hospital discharges including inpatient, outpatient and emergency department regardless of insurance status or state of residence. Includes up to 30 diagnoses and 25 procedures codes allowing analyses by diagnosis and/or procedures.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results?	Data only includes occurrences within the state of Mississippi. Data includes charges, not actual costs. Data includes only non-federal and non-tribal facilities.

	What biases exist?	
Indicators for Analysis	Which key indicators are collected in the data?	Demographics, diagnosis codes (ICD-9-CM/ICD-10-CM), procedure codes (ICD-9-CM, ICD-10-PCS, CPT), injury codes, age, gender, primary payer, charges
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, Sex, Race, Ethnicity, Socioeconomic Status (Principal source of payment)
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where on msdh.ms.gov can this data and these reports be found?	AHRQ Data Tools – Agency for Healthcare Research and Quality https://datatools.ahrq.gov/
Who Manages Data	Who is responsible for the data?	Mississippi State Department of Health, Office of Vital Records and Public Health Statistics
Funding Sponsor	Who funds the data collection?	Fees for hospital discharge data
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/page/31,0,348.html

Regulatory and Licensing Data



Regulatory and Licensing Data Template

RLD

Purpose	Please write one sentence describing the purpose of this data source.
Public Use Dataset	Is this data set available for public use?
Design	What are the data collection methods?
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.
Frequency	How often is the data collected and when does data become available?
Population (Units)	Who is represented in the data set?
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?
Data Years	What year did data collection begin and what is the most current year available?
Strengths	What is the data useful for?
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?
Indicators for Analysis	Which key indicators are collected in the data?
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where can the data and reports be found? Weblink preferred.
Who Manages Data	Who is responsible for the data?
Funding Sponsor	Who funds the data collection?
Data Request	Where to request the data from the agency (if not already available through the MSDH website)

To Learn More

Where to explore additional information?

Boiler and Pressure Vessel Safety

RLD

Purpose	Please write one sentence describing the purpose of this data source.	Jurisdiction online provides records of locations and any pressure-retaining device to be inspected for safety.
Public Use Dataset	Is this data set available for public use?	No, this is a service provided for the State but purchased by insurance companies using the data.
Design	What are the data collection methods?	The data is collected from site surveys by authorized inspectors that have been certified by the state.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Title 15 Mississippi Dept. of Health Part 10 Boiler and Pressure Vessel Safety
Frequency	How often is the data collected and when does data become available?	This is an ongoing process with scheduled inspection annually unless the client has high pressure (15 or higher), where inspections happen semi-annually.
Population (Units)	Who is represented in the data set?	All businesses and entities that have pressure-retaining devices are subject to be inspected. Not private individuals.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County, Health District, Hospital Service Area
Data Years	What year did data collection begin and what is the most current year available?	Boiler and Pressure Vessel Safety has been operating in the State of Mississippi for over 20 years. The system inspection safety information is stored today, named Jurisdiction Online (JOL), has been in use since 2010.
Strengths	What is the data useful for?	Data collected from the safety inspections is used to ensure compliance with safety regulations through regularly scheduled inspections.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results?	Private individuals and pressure retaining devices that fall below the minimum standards for inspection

	What biases exist?	
Indicators for Analysis	Which key indicators are collected in the data?	Any new units, violations, and compliance issues.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	None
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where can the data and reports be found? Weblink preferred.	Annual reports, data briefs, legislative reports, etc. Reporting is used internally to keep the database updated.
Who Manages Data	Who is responsible for the data?	Boiler and Pressure Vessel Safety works in conjunction with JOL to maintain the integrity of the database.
Funding Sponsor	Who funds the data collection?	Fees collected from the end users
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/page/30,0,193.html

Aw26 Food System-Stores		RLD
Purpose	Please write one sentence describing the purpose of this data source.	Aw26 Food System-Stores inspection reports and payment records for food facilities.
Public Use Dataset	Is this data set available for public use?	General data is available via msdh.ms.gov
Design	What are the data collection methods?	<ol style="list-style-type: none"> 1. Inspection reports entered manually or via OnTheGo. OnTheGo is our inspection app that picks up inspection to do lists for each inspector from aw26, allows the inspector to fill out the inspection forms, uploads completed inspection forms to aw26, and sends out PDF copies of the inspection to the food facility. 2. Payment records entered manually or via payment vendor
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	FDA Food Code 2022 MS Title 15, Part 13, Food Protection The data retention period is three years. Records are maintained indefinitely.
Frequency	How often is the data collected and when does data become available?	Data is collected/analyzed daily and is available immediately after uploading. The data is available to the inspectors and supervisors for the purpose of reviewing inspection history. It is also available to the facilities in abbreviated form at msdh.ms.gov .
Population (Units)	Who is represented in the data set?	Any for-profit entity that prepares and serves food to the public is represented in the data set. This additionally includes public schools. Our Manufactured Food office handles facilities that process foods for wholesale and those that warehouse or repack food goods
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, to include all counties and health districts
Data Years	What year did data collection begin and what is the most current year available?	Roughly 2005. Most of the current year is 2024. Majority of the data is online, although some paper files are still stored at the Central Office in Jackson, but most have been destroyed.

Strengths	What is the data useful for?	Payment collections and compliance histories
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	What items may not be represented in the data? Payments and inspection records not related to retail food facilities (summer feeding, family day care, consultations, FDA contracts, etc.). There may be a federally administrated system for FDA contracts. Incorrect permit dates, outdated info on closed/open food facilities
Indicators for Analysis	Which key indicators are collected in the data?	Regulatory compliance is collected in the data, as well as payment records for things like food permit renewals. We use this information for tracking compliance histories and for billing.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	None.
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where can the data and reports be found?	Annual reports, data briefs, legislative reports, etc. Weekly sitreps
Who Manages Data	Who is responsible for the data?	Nick.creel@msdh.ms.gov
Funding Sponsor	Who funds the data collection?	MSDH Division of Food Protection
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To Learn More	Where to explore more information?	https://msdh.ms.gov/msdhsite/_static/30,0,77.html

Licensing and Reporting System for Certified Operators and Backflow Assembly Testers

RLD

Purpose	Please write one sentence describing the purpose of this data source.	Drinking Water Operator and Backflow Prevent Assembly Tester (BPAT) Certification (Licensing) Program. BPAT system is hosted by the Mississippi Office of Information Technology Services and identified as Licensing and Reporting System (LARS). This system houses all certification data for the state certified operators and backflow assembly testers. It provides tracking of continuing education hours and recertification of BPAT testers in accordance MS law and MSDH regulations.
Public Use Dataset	Is this data set available for public use?	LARS provides the public with an ability to query for certification class and type in addition to location information of the BPAT tester in a county or region of the state.
Design	What are the data collection methods?	New operator information is placed into the system initially to start the new individual's certification profile through a personalized secure login. Existing operators/BPAT individuals periodically login to update existing contact information and to verify that CEU credit is received in response to the training that they have attended. The application also handles the certification renewal process along with the processing of the certification fees.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	MS Code 21-27-207 and 41-26-6
Frequency	How often is the data collected and when does data become available?	Data is collected and updated by both the certified individuals and staff for the Bureau of Public Water Supply
Population (Units)	Who is represented in the data set?	There are approximately 1,500 certified operators and backflow assembly testers throughout the state that are housed in this data application. They served as operators for the state's 1,191 public water system that are governed by the Safe Drinking Water Act.

Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County
Data Years	What year did data collection begin and what is the most current year available?	This house historical certification data for operators both active and inactive. Data is updated routinely.
Strengths	What is the data useful for?	Maintaining certification in accordance with state law and regulations.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	systems that a particular operator has worked for in their time as an operator. Some data collected may be personal information.
Indicators for Analysis	Which key indicators are collected in the data?	Date of birth, Graduate, time as a operator, CEUs hours per certification period, operator status.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	None
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where can the data and reports be found? Weblink preferred.	Annual reports, data briefs, legislative reports, etc. Number of active certified operators Performance measures that are provided to the State Legislature.
Who Manages Data	Who is responsible for the data?	The Bureau's Operator Certification Officer
Funding Sponsor	Who funds the data collection?	EPA through existing ongoing grants as well as a water operator fee that is collecting for new operators and recertifying operators.
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/page/30,0,76,315.html

Internet Quality Improvement and Evaluation System (iQIES)

RLD

Purpose	Please write one sentence describing the purpose of this data source.	CMS iQIES is a web-based system that State Agencies (SA) use to submit and manage data on the quality of care provided to Medicare and Medicaid beneficiaries in their state, contributing to the CMS's nationwide efforts to improve healthcare quality for vulnerable populations.
Public Use Dataset	Is this data set available for public use?	The data collected and stored within the CMS iQIES system is confidential and belongs solely to CMS. Access to this data is restricted to authorized users who have obtained the necessary permissions from CMS, as it is protected by federal regulations like the Privacy Act and HIPAA. Unauthorized access or disclosure of iQIES data is prohibited and may result in legal penalties. While CMS provides some aggregated and de-identified data for public use through reports and public use files, access to the full dataset requires formal authorization and a demonstrated legitimate need for the information.
Design	What are the data collection methods?	Direct data entry by the Mississippi State Agency (Office of Licensure & Certification)
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	The collection of data through the CMS iQIES is authorized under multiple legal authorities including but not limited to: The Social Security Act (SSA) (42 U.S.C. § 301 et seq.), IMPACT Act (42 U.S.C. § 1395x), Federal Register 42 CFR Parts 483 – 485.
Frequency	How often is the data collected and when does data become available?	Data is collected daily, and the State Agency (SA) has access shortly after submission.
Population (Units)	Who is represented in the data set?	Healthcare facilities that are certified through the Centers for Medicare and Medicaid Services (CMS). Licensed facilities are also represented.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County. MSDH specific data such as Health District is not included in this Federal program.
Data Years	What year did data collection begin and what is the most current year available?	Data collection began in May 2021 and is currently through the present day.
Strengths	What is the data useful for?	<ul style="list-style-type: none"> • Monitoring and Assessing Quality of Care: iQIES data allows CMS and state agencies to track quality measures and identify areas where care can be improved for Medicare and Medicaid beneficiaries.

		<ul style="list-style-type: none"> • Identifying Trends and Patterns: By analyzing iQIES data over time, CMS and state agencies can identify trends and patterns in healthcare utilization, outcomes, and disparities, informing policy decisions and targeted interventions. • Oversight and Enforcement: iQIES data is used to monitor provider compliance with regulations and standards of care, allowing for targeted enforcement actions when necessary to protect beneficiary health and safety.
Limitations	<p>What items may not be represented in the data?</p> <p>What caution should be taken when looking at data results?</p> <p>What biases exist?</p>	<ul style="list-style-type: none"> • Monitoring and Assessing Quality of Care: MSDH specific Data is not represented in the data. This is a Federal Program. • Identifying Trends and Patterns: Caution should be taken related to data is only granted to certified individuals authorized by CMS. • Potential Reporting Bias: Providers may overreport positive outcomes or underreport negative ones. • Potential Data Completeness Bias: Incomplete data submission can lead to inaccurate conclusions. • Potential Measurement Bias: iQIES measures may not fully capture all aspects of care quality. • Potential Case-Mix Bias: Differences in patient populations can affect provider performance on quality measures. • Potential Time Lag Bias: Delays in data reporting can affect its timeliness and relevance.
Indicators for Analysis	<p>Which key indicators are collected in the data?</p>	<p>The key indicators collected in the CMS iQIES data for Mississippi providers are essential for our agency's oversight and improvement of healthcare quality. These indicators vary depending on the specific program and provider type, but some common ones include:</p> <p>Long-Term Care Facilities:</p> <ul style="list-style-type: none"> • Quality Measures (QMs): These assess various aspects of care, such as prevalence of pressure ulcers, falls, and use of antipsychotic medications, allowing us to monitor and address potential issues in nursing homes across the state. • Resource Utilization Groups (RUGs): These classify residents based on their care needs and are used for payment and case-mix adjustment, ensuring appropriate reimbursement for facilities while promoting quality care.

- **Staffing Levels:** Information on staffing hours and ratios help us assess the adequacy of care provided in each facility, ensuring resident safety and well-being.
- **Resident Assessment Data:** Collected through the Minimum Data Set (MDS), this data, including demographics, diagnoses, functional status, and care needs, provides a comprehensive picture of the resident population and informs our regulatory and quality improvement efforts.

Home Health Agencies:

- **Outcome and Assessment Information Set (OASIS):** By assessing patient demographics, functional status, and care needs at various points during the care episode, patient progress can be tracked ensuring that home health agencies are providing appropriate and effective care.
- **Process Measures:** These assess the provision of specific care processes, such as timely initiation of care, medication reconciliation, and patient education, helping the SA monitor and enforce adherence to best practices.
- **Outcome Measures:** By assessing patient outcomes, such as improvement in functional status, reduction in hospitalizations, and emergency department visits, we can evaluate the effectiveness of home health services and identify areas for improvement.

Hospices:

- **Hospice Item Set (HIS):** Similar to OASIS, this assessment tool provides valuable insights into patient demographics, diagnoses, functional status, and care needs at admission, recertification, discharge, and death, allowing the SA to monitor the quality of hospice care in Mississippi.
- **Quality Measures:** Assessing aspects of care, such as pain management, symptom control, and patient/family satisfaction, helps the SA ensure that hospices are meeting the unique needs of their patients and families.
- **Care Process Measures:** These measures assess the provision of specific care processes, such as bereavement counseling and spiritual support, which are critical components of comprehensive hospice care.

By utilizing the key indicators collected in iQIES, our SA can effectively oversee and enhance the quality of care provided to Medicare and Medicaid beneficiaries across

		various healthcare settings in Mississippi. We can identify areas of improvement, enforce compliance with regulations, and ultimately ensure that the vulnerable populations we serve receive the high-quality care they deserve.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	n/a
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where can the data and reports be found? Weblink preferred.	This data is used by Centers for Medicare and Medicaid Services (CMS) and the Mississippi State Agency to effectively regulate, oversee, and enhance the quality of care provided to Medicare and Medicaid beneficiaries across various healthcare settings in Mississippi. Information can assist in identifying areas of improvement, enforce compliance with regulations, and ultimately ensure that the vulnerable populations we serve receive the high-quality care they deserve.
Who Manages Data	Who is responsible for the data?	The Mississippi State Agency (MSDH Office of Licensure & Certification / Centers for Medicare and Medicaid Services (CMS))
Funding Sponsor	Who funds the data collection?	The Centers for Medicare and Medicaid Services (CMS)
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To Learn More	Where to explore additional information?	There is no further information available at this time.

Licensing and Reporting System (LARS)

RLD

Purpose

Please write one sentence describing the purpose of this data source.

The LARS system is used for licensing and certification of Mississippi childcare facilities art therapists, athletic trainers, body piercing operators, dietitians, hair braiders, hearing aid specialists, hemodialysis technicians, medical radiating technicians, occupational therapists, OTAs, respiratory care practitioners, speech-language pathologists/audiologists, SPL/a aides, and tattoo operators and facilities. The system is also used for management of complaints and investigations regarding the various professions.

Public Use Dataset

Is this data set available for public use?

Portions of the licensing data are available for public use, as identified in regulation.

Design	What are the data collection methods?	Licensing: This is an on-line application system for licensees and applicants to apply for a license or certificate or to make changes to existing accounts. Investigations: This is a management system that is manually updated when a complaint investigation is completed.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Child care facilities (Miss Code Ann. §43-20-8), art therapists facilities (Miss Code Ann. §73-65-1), athletic trainers (Miss Code Ann. §73-55-17), body piercing operators (Miss Code Ann. §73-61-3), dietitians (Miss Code Ann. §73-10-21), hair braiders (Miss Code Ann. §73-7-71), hearing aid specialists (Miss Code Ann. §73-14-1), hemodialysis technicians (Miss Code Ann. §41-3-15), medical radiation technicians (Miss Code Ann. §41-58-3), occupational therapists, OTAs (Miss Code Ann. §73-24-13), respiratory care practitioners (Miss Code Ann. §73-57-1), speech-language pathologists/audiologists (Miss Code Ann. §73-38-13), SPL/a aides (Miss Code Ann. §73-38-13), and tattoo operators and facilities (Miss Code Ann. §73-61-3). Retention Periods: Childcare inspection-2 years plus 1 Childcare complaint-5 years after close of investigation Health-related professions-every 2 years or each renewal period
Frequency	How often is the data collected and when does data become available?	Data is collected whenever an applicant applies for a license, which is daily, when a licensee renews their license, which is on an annual schedule. The data is updated daily.
Population (Units)	Who is represented in the data set?	Childcare providers, art therapists, athletic trainers, body piercing operators, dietitians, hair braiders, hearing aid specialists, hemodialysis technicians, medical radiating technicians, occupational therapists, OTAs, respiratory care practitioners, speech-language pathologists/audiologists, SPL/a aides, and tattoo operators and facilities.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	Applicants and licensees provide a work or home address.

Data Years	What year did data collection begin and what is the most current year available?	Collections in LARS began in 2017.
Strengths	What is the data useful for?	Tracking new childcare facilities. Tracking of the number of individuals applying for licensure in “other” health related professions. Tracking the number of complaints and alleged issues.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	n/a
Indicators for Analysis	Which key indicators are collected in the data?	Childcare providers, art therapists, athletic trainers, body piercing operators, dietitians, hair braiders, hearing aid specialists, hemodialysis technicians, medical radiating technicians, occupational therapists, OTAs, respiratory care practitioners, speech-language pathologists/audiologists, SPL/a aides, and tattoo operators and facilities, investigations, and complaints.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	n/a
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where can the data and reports be found?	Upon request for legislature. Upon request for other programs/departments as deemed relevant for use of data.
Who Manages Data	Who is responsible for the data?	Mississippi State Department of Health/Office of Licensure
Funding Sponsor	Who funds the data collection?	Mississippi State Department of Health/Office of Licensure
Data Request		Submit your request through our online Form

	Where to request the data from the agency (if not already available through the MSDH website)	
To Learn More	Where to explore additional information?	There is no further information available at this time.

Mississippi Screening Assurance for Employee Enrollment and Registries (MsSAFER)		RLD
Purpose	Please write one sentence describing the purpose of this data source.	The MsSAFER system is used for completing background checks for all MSDH childcare and health care facilities. .
Public Use Dataset	Is this data set available for public use?	The MSDH background check data is not available for public use.

Design	What are the data collection methods?	The online application system allows health care and childcare facilities to submit applications, pay for applications, and review portions of background check results.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Health care facilities (Miss Code § 43-11-13), Childcare facilities (Miss Code § 43-20-8). The retention period for all background checks is 5 years.
Frequency	How often is the data collected and when does data become available?	Data is collected when a childcare or health care facility creates a new application for an applicant. The data is updated daily.
Population (Units)	Who is represented in the data set?	Individuals working in childcare & health care facilities in Mississippi.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	Applicants provide work and home mailing address.
Data Years	What year did data collection begin and what is the most current year available?	2023-2024
Strengths	What is the data useful for?	Tracking all background checks completed by the MSDH background check unit for childcare and health care facilities.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Social security number, personal demographic information, and certain portions of the background check results. Only authorized childcare and health care facilities; and MSDH background check unit personnel are allowed to view this data.
Indicators for Analysis	Which key indicators are collected in the data?	Childcare and health care applicants submit a background check to work in a MSDH childcare or health care facility.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	n/a

Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where can the data and reports be found?	Annual reports, data briefs, legislative reports, are provided upon request by legislature. Upon request, other programs/departments as deemed relevant for use.
Who Manages Data	Who is responsible for the data?	Mississippi State Department of Health/Office of Licensure, Fingerprint Unit
Funding Sponsor	Who funds the data collection?	Mississippi State Department of Health/Office of Licensure
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To explore more information	Where to explore additional information?	There is no further information available at this time.

Automated Survey Processing Environment (ASPEN)		RLD
Purpose	Please write one sentence describing the purpose of this data source.	ASPEN (Automated Survey Process Environment) is a suite of software designed to help State Agencies collect and manage healthcare provider data. The use of this system is required by the Federal Mandate to complete Federally Funded work.
Public Use Dataset	Is this data set available for public use?	The data is not available for public use. The data collected and stored within the CMS ASPEN system is confidential and belongs solely to CMS. Access to this data is restricted to authorized users who have obtained the necessary permissions from CMS, as it is protected by federal regulations like the Privacy Act and HIPAA. Unauthorized access or disclosure of ASPEN data is prohibited and may result in legal penalties. While CMS provides some aggregated and de-identified data for public use through reports and public use files, access to the full dataset requires formal authorization and a demonstrated legitimate need for the information.
Design	What are the data collection methods?	The collection of data through the entry of data by individuals responsible for completing federal survey and certification work for MSDH Licensure and Certification.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	The collection of data through the CMS ASPEN is authorized under multiple legal authorities including but not limited to: The Social

		Security Act (SSA) (42 U.S.C. § 301 et seq.), IMPACT Act (42 U.S.C. § 1395x), Federal Register 42 CFR Parts 483 – 485.
Frequency	How often is the data collected and when does data become available?	Data collected daily and data is available to the SA shortly after submission.
Population (Units)	Who is represented in the data set?	All state licensed providers/suppliers who participate in the Medicare/Medicaid program.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County. MSDH specific data such as Health District is not included in the Federal requirements.
Data Years	What year did data collection begin and what is the most current year available?	Unsure of when ASPEN was created/implemented, sometime in the 1990's. 2024 is the current year available.
Strengths	What is the data useful for?	<ul style="list-style-type: none"> • ASPEN uploads data to the National CMS database through CASPAR so it is available for national reports to be used for: • ASPEN data allows CMS and state agencies to track quality measures and identify areas where care can be improved for Medicare and Medicaid beneficiaries. • By analyzing ASPEN data over time, CMS and state agencies can identify trends and patterns in healthcare utilization, outcomes, and disparities, informing policy decisions and targeted interventions. • ASPEN data is used to monitor provider compliance with regulations and standards of care, allowing for targeted enforcement actions when necessary to protect beneficiary health and safety.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	MSDH Specific Data. Only required Federal Data is entered. If there is an error in data entry, data may not be accurate. What biases exist?

		<ul style="list-style-type: none"> • Potential Reporting Bias: Providers may overreport positive outcomes or underreport negative ones. • Potential Data Completeness Bias: Incomplete data submission can lead to inaccurate conclusions. • Potential Measurement Bias: ASPEN data measures may not fully capture all aspects of care quality. • Potential Case-Mix Bias: Differences in patient populations can affect provider performance on quality measures. • Potential Time Lag Bias: Delays in data reporting can affect its timeliness and relevance.
Indicators for Analysis	Which key indicators are collected in the data?	<p>The key indicators collected in the CMS ASPEN data for Mississippi providers are essential for our agency's oversight and improvement of healthcare quality. These indicators vary depending on the specific program and provider type, but some common ones include:</p> <p>Long-Term Care Facilities:</p> <ul style="list-style-type: none"> • Quality Measures (QMs): These assess various aspects of care, such as prevalence of pressure ulcers, falls, and use of antipsychotic medications, allowing us to monitor and address potential issues in nursing homes across the state. • Resource Utilization Groups (RUGs): These classify residents based on their care needs and are used for payment and case-mix adjustment, ensuring appropriate reimbursement for facilities while promoting quality care. • Staffing Levels: Information on staffing hours and ratios helps us assess the adequacy of care provided in each facility, ensuring resident safety and well-being. • Resident Assessment Data: Collected through the Minimum Data Set (MDS), this data, including demographics, diagnoses, functional status, and care needs, provides a comprehensive picture of the resident

population and informs our regulatory and quality improvement efforts.

Home Health Agencies:

- **Outcome and Assessment Information Set (OASIS):** By assessing patient demographics, functional status, and care needs at various points during the care episode, patient progress can be tracked ensuring that home health agencies are providing appropriate and effective care.
- **Process Measures:** These assess the provision of specific care processes, such as timely initiation of care, medication reconciliation, and patient education, helping the SA monitor and enforce adherence to best practices.
- **Outcome Measures:** By assessing patient outcomes, such as improvement in functional status, reduction in hospitalizations, and emergency department visits, we can evaluate the effectiveness of home health services and identify areas for improvement.

Hospices:

- **Hospice Item Set (HIS):** Like OASIS, this assessment tool provides valuable insights into patient demographics, diagnoses, functional status, and care needs at admission, recertification, discharge, and death, allowing the SA to monitor the quality of hospice care in Mississippi.
- **Quality Measures:** Assessing aspects of care, such as pain management, symptom control, and patient/family satisfaction, helps the SA ensure that hospices are meeting the unique needs of their patients and families.
- **Care Process Measures:** These measures assess the provision of specific care processes, such as bereavement counseling and spiritual support, which are critical components of comprehensive hospice care.

		By utilizing the key indicators collected in ASPEN, our SA can effectively oversee and enhance the quality of care provided to Medicare and Medicaid beneficiaries across various healthcare settings in Mississippi. We can identify areas of improvement, enforce compliance with regulations, and ultimately ensure that the vulnerable populations we serve receive the high-quality care they deserve.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	n/a
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where can the data and reports be found?	This data is used by Centers for Medicare and Medicaid Services (CMS) and the Mississippi State Agency to effectively regulate, oversee, and enhance the quality of care provided to Medicare and Medicaid beneficiaries across various healthcare settings in Mississippi. Information can assist in identifying areas of improvement, enforce compliance with regulations, and ultimately ensure that the vulnerable populations we serve receive the high-quality care they deserve.
Who Manages Data	Who is responsible for the data?	MSDH Office of Health Facilities Licensure & Certification/Centers for Medicare and Medicaid Services (CMS)
Funding Sponsor	Who funds the data collection?	Centers for Medicare and Medicaid Services (CMS)
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To explore more information	Where to explore additional information?	There is no further information available at this time.

MsWater & BPWS Application (MsWater)		RLD
Purpose	Please write one sentence describing the purpose of this data source.	Internal program application for the management of various activities necessary to perform oversight and management of the Public Water System Supervision Program as performed by the Bureau of Public Water Supply (BPWS). This application includes following functions: generation of Sanitary Survey/Inspection Reports of the state’s public water systems; processing and management of drinking water infrastructure plan reviews; processing and management of the BPDS digital archiving system; generation and maintenance capacity development forms; generation of water quality analysis reports for review; water system complaint tracking; and provides a means for reporting data from the Safe Drinking Water Information System to transmit this information back out to water systems for their use
Public Use Dataset	Is this data set available for public use?	This application is only available for the staff of the BPWS to utilize in the performance of their day-to-day activities. The data associated with water quality analysis is available to the public through SDWIS’s “Drinking Water Watch.”
Design	What are the data collection methods?	Much of the data is collected through water quality analysis performed by MPHL through the data that they supply to the program. This application serves as an interface to access the information in a narrative or graphical format. Additionally, it provides an interface to our efile system.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	The Department has the authority to collect and maintain this data as a condition of maintaining primacy over the oversight and implementation of the SDWA in accordance with the Mississippi Safe Drinking Water Act – MS

		Code 41-6-6. The Environmental Protection Agency grants MSDH this authority.
Frequency	How often is the data collected and when does data become available?	Data is collected and updated by staff for the Bureau of Public Water Supply and water quality analysis (WQA) data provided by Mississippi Public Health Laboratory. MPHIL declares WQA data official when the appropriate quality assurance checks have been performed.
Population (Units)	Who is represented in the data set?	WQA data, survey information, and efile system are reflective of the state's 1,191 public water systems serving approximately 2.8M people.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County, and the Bureau's declared regions.
Data Years	What year did data collection begin and what is the most current year available?	Water quality analysis data and inspection information is digitally available back to 2002. As this is an environmental program, collection and reporting of data is ongoing. Data is updated routinely.
Strengths	What is the data useful for?	Analyzing trends in water quality data. Reviewing a system's infrastructure relating to operation and maintenance.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	What items may not be represented in the data? Detailed information regarding a public water system financial or managerial capacity for long term viability. What caution should be taken when looking at data results? Doesn't consider the management factor of a public water system. What biases exist? None
Indicators for Analysis	Which key indicators are collected in the data?	Date of inspection; violations; WQA data; significant deficiencies issued; timeline of their tracking.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	None
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where can the data and reports be found?	Annual reports, data briefs, legislative reports, etc. Performance measures that are provided to the State Legislature.

Who Manages Data	Who is responsible for the data?	The Bureau of Public Water Supply Compliance and Field Engineering Staff
Funding Sponsor	Who funds the data collection?	Environmental Protection Agency through existing ongoing grants as well as a Water Quality Analysis Fee.
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/msdhsite/ static/30,0,76.html

Public Water System Interactive Portal (PWS Portal)

RLD

<p>Purpose</p>	<p>Please write one sentence describing the purpose of this data source.</p>	<p>External program application for the management of information that is both transmitted to the state public water systems (PWS), but also received from the public water system community to ensure compliance with the various provisions of the SDWA. This vital application performs the following activities: the creation and updates to PWS Annual Reports-System Board Members; dissemination of consumer confidence report (CCR) data as well as submission of completed reports by the PWSs; maintaining current RTCR Sample Site Plans; generation of Water Quality Analysis Reports; queries for both emergency response and treatment issues; Lead and Copper Rule (LCR) reporting and notification; submission of a system lead service line inventory; listing of all inspection reports to date; and provides a messaging system for PWSs.</p>
<p>Public Use Dataset</p>	<p>Is this data set available for public use?</p>	<p>While the data/information is available via a public records request, this application has a secure login for only water system responsible officials and their certified operators and is not publicly accessible.</p>
<p>Design</p>	<p>What are the data collection methods?</p>	<p>Officials may upload documents to satisfy specific requirements such as those affiliated with the CCR or LCR. They can also respond to inquiries asked for by the Bureau such as their status with regards to feeding fluoride or operational status post hurricane. It also serves as a communication tool.</p>
<p>Authority for Collection</p>	<p>Cite the authority under which this collection of data was made and what the data retention period is.</p>	<p>The Department has the authority to collect and maintain this data as a condition of maintaining primacy over the oversight and implementation of the SDWA in accordance with the Mississippi Safe Drinking Water Act – MS Code 41-6-6. The Environmental Protection Agency grants MSDH this authority.</p>
<p>Frequency</p>	<p>How often is the data collected and when does data become available?</p>	<p>Data is collected and updated by staff for the Bureau of Public Water Supply and water quality analysis (WQA) data provided by MPHL. MPHL declares WQA data official when the appropriate quality assurance checks have been performed. Additionally, data is requested through the portal periodically based on regulatory need and varying circumstances.</p>

Population (Units)	Who is represented in the data set?	WQA data, survey information, and efile system are reflective of the state's 1,191 public water systems serving approximately 2.8M people.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County, and the Bureau's declared regions.
Data Years	What year did data collection begin and what is the most current year available?	Water quality analysis data is digitally available back to 2002. Inspection information is available to 2002. As this is an environmental program, collection and reporting of data is ongoing. Data is updated routinely.
Strengths	What is the data useful for?	Good for analyzing trends in water quality data; reviewing a system's infrastructure relating to operation and maintenance; communicating to the water system officials about monitoring information; and the application allows for timestamping of compliance documents.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	What items may not be represented in the data? Access to the plan review system is currently not available. What caution should be taken when looking at data results? Data available to system officials is only reflective of water quality analysis since 2022. What biases exist? None
Indicators for Analysis	Which key indicators are collected in the data?	Which Date of inspection; violations; WQA data; timeline of their tracking of information; annual report information.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	None
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where can the data and reports be found?	Annual reports, data briefs, and information available only to system officials and their certified operators.
Who Manages Data	Who is responsible for the data?	The Bureau's Compliance and Field Engineering Staff is responsible for this application, submitting supporting documentation for compliance purposes.
Funding Sponsor	Who funds the data collection?	Environmental Protection Agency through existing ongoing grants.

Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/msdhsite/_static/30,0,76.html

Purpose	Please write one sentence describing the purpose of this data source.	EMResource is a web-based resource management and communication tool developed by Juvare.
Public Use Dataset	Is this data set available for public use?	Not available for public use. The system is available to healthcare providers, EMS agencies and local, state and federal response partners.
Design	What are the data collection methods?	EMResource equips those involved in healthcare and emergency response with holistic operational views of area and regional resources, as well as the means to quickly work with resource details.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Minimum Standards of Care and Health Facility Licensure Regulations
Frequency	How often is the data collected and when does data become available?	Facilities manually enter data based on facility type on a daily or weekly cadence as required by Minimum Standards of Care.
Population (Units)	Who is represented in the data set?	Who is represented in the data set?
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County, Public Health District, Public Health Region
Data Years	What year did data collection begin and what is the most current year available?	2023 to Present
Strengths	What is the data useful for?	EMResource provides emergency medical response facilities and first responders with a common operating picture and essential communication tools that are critical to monitoring healthcare assets, emergency department capacity, facility operational and infrastructure statuses, staffing capabilities, bed availability and EOP activation.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	Dependent on designated users of healthcare provider data collection; Hospitals are required to report daily; Users for long term care, dialysis, behavioral mental health and other providers are currently being added to the system and do not currently have requirements for reporting statuses. SPR is in

		the process of determining pre-defined EEI and protocols for reporting requirements from these facilities. Once established, training will be provided.
Indicators for Analysis	Which key indicators are collected in the data?	Healthcare assets, specialty capabilities/availability, emergency department capacity/availability, facility operational/infrastructure statuses, staffing capabilities, bed capacity/availability and EOP activation.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	None
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where can the data and reports be found?	https://www.login.juware.com
Who Manages Data	Who is responsible for the data?	Data hosted and stored through software vendor Juvare. Data system managed by the ESF8 Data Analyst in SPR at MSDH.
Funding Sponsor	Who funds the data collection?	PHEP / HPP
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To Learn More	Where to explore additional information?	There is no further information available at this time.

Mississippi Responder Management System (MRMS)

RLD

Purpose	Please write one sentence describing the purpose of this data source.	Mississippi Responder Management System (MRMS) is a system for identifying, activating, and deploying volunteers during disasters, and functions as a communication tool for providing volunteers with information about training and exercises.
Public Use Dataset	Is this data set available for public use?	The volunteer, the local and state volunteer program administrator, and the vendor contracted to maintain the Site and its services have access to the data. The system is available for the public to register as a volunteer but is limited to just that. There are no views on other individual or volunteer organizations already registered in the system.
Design	What are the data collection methods?	The current design is limited to registration as an individual or group volunteer organization. Work is underway to add payment information and other functionality to MRMS.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	Data is maintained until the volunteer requests closure.
Frequency	How often is the data collected and when does data become available?	Volunteer Coordinators update the database daily, and volunteers can sign up at any time.
Population (Units)	Who is represented in the data set?	Actively licensed, a student, retired health professional, or someone with an interest in volunteering during a health emergency.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State of Mississippi
Data Years	What year did data collection begin and what is the most current year available?	2022-2024
Strengths	What is the data useful for?	System verifies the identity, credentials, certifications, licenses, and hospital privileges of health professionals.
Limitations	What items may not be represented in the data?	Users unwilling to input all information needed.

	What caution should be taken when looking at data results? What biases exist?	
Indicators for Analysis	Which key indicators are collected in the data?	All volunteers must provide valid identification. Those working in a professional capacity will also have to provide their current professional license.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	Age, gender, disability status
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where can the data and reports be found? Weblink preferred.	MRMS (signupms.org)
Who Manages Data	Who is responsible for the data?	Mississippi State Department of Health
Funding Sponsor	Who funds the data collection?	Public Health Emergency Preparedness grant
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/msdhsite/ static/44,5669,122,154.html#

Regulatory and Licensing Data Template- EMS Certification

RLD

Purpose	Please write one sentence describing the purpose of this data source.	Maintain a database of all EMS personnel certified to practice in the state.
Public Use Dataset	Is this data set available for public use?	Certain data can be provided through the MSDH Public Records Request process.
Design	What are the data collection methods?	Office of EMS and Acute Care Systems (OEMSACS) staff will enter data into Image Trend for individuals following completion of required elements for certification.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	MS Code 41-59-5 (2)
Frequency	How often is the data collected and when does data become available?	Data collection is ongoing for certifying and recertifying EMS personnel in the state.
Population (Units)	Who is represented in the data set?	Emergency Medical Responders, Emergency Medical Services Driver, Emergency Medical Technician, Advanced Emergency Medical Technician, Paramedic, and Critical Care Paramedic
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County, City, EMS District
Data Years	What year did data collection begin and what is the most current year available?	In 1993, a component was added to MEMSIS to maintain information on EMS personnel certification and recertifications. 2024 is the most current year available.
Strengths	What is the data useful for?	Maintaining a current list of trained EMS providers in the state and providing dates of when their certifications expire.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	What field of practice are individuals currently working in or if they are active EMS professionals. Regulatory actions by provider. What caution should be taken when looking at data results? Data could be misleading and not give an accurate depiction of providers in the workforce. Personnel are counted for each service they are employed by, therefore skewing the actual numbers of certified providers.

Indicators for Analysis	Which key indicators are collected in the data?	Demographic information, certification issue date, and expiration date.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	N/A
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where can the data and reports be found?	Annual reports, data briefs, legislative reports, etc. EMS Advisory Committee meetings, legislative reports
Who Manages Data	Who is responsible for the data?	OEMSACS
Funding Sponsor	Who funds the data collection?	EMS Licensure fees
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/page/47.html#

Regulatory and Licensing Data Template – EMS Licensure

RLD

Purpose	Please write one sentence describing the purpose of this data source.	Provides a process for licensing, certifying and inspecting all EMS services and ambulances in the state. Provides a record of all EMS services and aids in the ability to track and schedule inspections and investigate complaints.
Public Use Dataset	Is this data set available for public use?	Certain data can be provided through the MSDH Public Records Request process.
Design	What are the data collection methods?	Office of EMS and Acute Care Systems (OEMSACS) staff enter data into Image Trend system during the initial/renewal licensing process and following each bi-annual inspection.
Authority for Collection	Cite the authority under which this collection of data was made and what the data retention period is.	MS Code 41-59-5 (2)
Frequency	How often is the data collected and when does data become available?	How often is the data collected and when does data become available? Data collection is ongoing for providing licenses, all inspections, conducting investigations, and handling compliance issues.
Population (Units)	Who is represented in the data set?	All MS licensed ambulances and ambulance services in the state.
Geographies	What geographies are available? State, County, Health District, Hospital Service Area?	State, County, Health District, Hospital Service Area? State, County, City, EMS District, out-of-state EMS providers for the state.
Data Years	What year did data collection begin and what is the most current year available?	In 1993, a component was added to MEMSIS to maintain information on all licensed EMS agencies and ambulances serving the state of Mississippi.
Strengths	What is the data useful for?	Maintaining a current list of licensed agencies and ambulances in the state and providing dates of when inspections and license renewals are required and provides a mechanism to ensure all ambulances are compliant with all state regulations.

Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What biases exist?	What items may not be represented in the data? Incorrect information entered or information not provided by individual services; HIPPA protected information. What caution should be taken when looking at data results? Validity of data
Indicators for Analysis	Which key indicators are collected in the data?	License number, issue and expiration dates, all ambulances listed under a service, and counties served.
Health Equity Indicators	Please fill out a questionnaire related to health equity indicators.	N/A
Reports / Online Resources	Which regular or large reports use this data? Annual reports, data briefs, legislative reports, etc. Where can the data and reports be found?	Annual reports, data briefs, legislative reports, etc. Also, EMS Advisory Committee meetings, legislative reports
Who Manages Data	Who is responsible for the data?	OEMSACS
Funding Sponsor	Who funds the data collection?	EMS Licensure fees
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/page/47.html

Data Resources

Information regarding population health status and contributors to health through additional resources is provided in this area. These resources include access to various data sources that, in combination, can help to better understand health trends, opportunities for health improvement and current actions for health protection.

Data Resource Overview

R

Overview	What is the purpose of this resource?
Access	What is the link to access the resource?
Reporting Structure	How is the data reported and displayed within the resource?
Data Years	What year did data collection begin and what is the most current year available?
Geographies	At what geographies can the data be displayed? State, County, Health District, Hospital Service Area, or additional geographies?
Population Restrictions	What is the detailed information about the population captured?
Strengths	What is the data useful for? Can you compare our data to other states or national data? What are the unique benefits or data points of the data set?
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What bias exists?
Updates	How often is the data in the resource updated?
Referenced Data Sources	Which data sources are represented?
Index of Topics	What are the key topics covered in this resource?
Controller	Who is responsible for updating and maintaining the resource?
Data Request	Where to request the data from the agency (if not already available through the MSDH website)

To Learn More

Where to explore additional information?

Performance Scorecards

R

Overview	What is the purpose of this resource?	Allow users to view interactive report cards, each with multiple measures. Statewide data shows how well Mississippi is doing (current value) compared to desired population outcomes (target value). Performance data shows how Health Department programs contribute to desired outcomes. Scorecards contain narrative sections in the <i>Story Behind the Curve</i> , providing context and notes about the measures. Scorecards inform the public of our performance and provide decision-makers with a way to use data to manage performance.
Access	What is the link to access the resource?	Performance Scorecards Webpage
Reporting Structure	How is the data reported and displayed within the resource?	Scorecards are built according to Results Based Accountability and contain two sections: population-level <i>Indicators</i> tied to overall Objectives; and <i>Performance Measures</i> tied to specific Programs. Scorecards are structured in a table format with color coding: green for improvement from the previous period, yellow for no change from the previous period, and red when moving in the wrong direction from the previous period. Program owners (programmatic staff) have primary responsibility for scorecard maintenance and performance measure reporting. Data owners (analytic staff) are responsible for sharing annual surveillance data for indicator reporting.
Data Years	What year did data collection begin and what is the most current year available?	Indicator trends show 10 years of data when available and have the most recently available data. Performance measure trends vary but are updated within the last quarter of the available data.
Geographies	At what geographies can the data be displayed? State, County, Health District, Hospital Service Area, or additional geographies?	Statewide (see Public Health Data Explorer – HV2020 for indicator sub-state data)
Population Restrictions	What is the detailed information about the population captured?	Surveillance measures are calculated similarly to the corresponding Healthy People measures. Some numbers are age-adjusted and could slightly differ from crude calculations. Other indicators vary in methodology. Performance measures are generally limited to the population served by the program.
Strengths	What is the data useful for? Can you compare our data to other states or national data?	Allows public access to performance data, population-level goals, and other Health Department priorities and frequently requested data. Allow for transparency of Health Department goals and activities.

	What are the unique benefits or data points of the data set?	
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What bias exists?	Scorecards and Data Explorer utilize most of the same data but have different methods for updating. Occasionally the Mississippi data on the scorecard is more recent than the data on the Data Explorer.
Updates	How often is the data in the resource updated?	Performance measures are updated on a quarterly basis. Indicators are updated once a year or as new data becomes available.
Referenced Data Sources	Which data sources are represented?	Behavioral Risk Factor Surveillance System (BRFSS), Youth Risk Behaviors Survey (YRBS), U.S. Census data, Healthcare Workforce Census, Vital Statistics, Pregnancy Risk Assessment Monitory Survey (PRAMS), Asthma Call Back Survey (ACBS), Mississippi Uniform Hospital Discharge Data Set (VUHDDS), Women Infants and Children (WIC) data, Adult Tobacco Survey (ATS), National Survey on Drug Use and Health (NSDUH), School Nurses' Report
Index of Topics	What are the key topics covered in this resource?	Healthy Mississippians 2020 (see Public Health Data Explorer – HV2020), State Health Improvement Plan, 3-4-50 (3 behaviors lead to 4 diseases that cause more than 50% of Mississippi deaths), Health in All Policies, Opioids, Vector, food, and waterborne diseases
Controller	Who is responsible for updating and maintaining the resource?	Mississippi Department of Health, Planning and Healthcare Quality unit
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To Learn More	Where to explore additional information?	There is no further information available at this time.

Trauma Registry – Image Trend		R
Overview	What is the purpose of this resource?	The Image Trend Trauma Registry supports the trauma centers’ required activities, including performance improvement, outcomes research, and resource utilization, as well as providing the Office of Emergency Medical Services and Acute Care Systems (OEMSACS) with the necessary data for statewide planning and injury prevention initiatives.
Access	What is the link to access the resource?	https://mississippi.imagetrendregistry.com
Reporting Structures	How is the data reported and displayed within the resource?	Data is submitted by hospitals on each encounter.
Data Years	What year did data collection begin and what is the most current year available?	The MSDH had a change in vendor between September 2023 and June 2024. The data is available back to 2006 (limited data set)
Geographies	At what geographies can the data be displayed? State, County, Health District, Hospital Service Area, or additional geographies?	State, County, City, Memphis, Mobile Data includes all Mississippi injuries that meet the trauma inclusion criteria.
Population Restrictions	What is the detailed information about the population captured?	Any patient receiving trauma care by a MS designated trauma center.
Strengths	What is the data useful for? Can you compare our data to other states or national data? What are the unique benefits or data points of the data set?	This data is critical in driving systematic performance improvement initiatives as well as a primary determinant in Trauma Care Trust Fund distributions.
Limitations	What items may not be represented in the data? What caution should be taken when looking at data results? What bias exists?	What caution should be taken when looking at data results? The same data can be entered under multiple names (e.g., using generic and brand names for drugs) What biases exist? Some of the data is HIPAA protected
Updates	How often is the data in the resource updated?	Data is entered daily at the hospital level

Referenced Data Sources	Which data sources are represented?	Patient encounters from arrival to discharge in the trauma center.
Index of Topics	What are the key topics covered in this resource?	Patient encounters from arrival to discharge in the trauma center.
Controller	Who is responsible for updating and maintaining the resource?	Office of EMS and Acute Care Systems
Data Request	Where to request the data from the agency (if not already available through the MSDH website)	Submit your request through our online Form
To Learn More	Where to explore additional information?	https://msdh.ms.gov/page/49.html