

Moving On: Continuing to Support the Transition From the Electronic Screening Tool



**Highlighting data system options to support
Healthy Start program implementation**

Speakers

- **Healthy Start EPIC Center**
 - *Amanda Baker & Maria Walawender | Help Desk Team*
- **Division of Healthy Start and Perinatal Services**
 - *Chris Lim | Project Officer*
- **Rochester Healthy Start**
 - *Valerie Garrison | Project Director*
- **Delta Health Alliance**
 - *Karin Scott | Associate VP of Strategic Data*
- **Northern Plains Healthy Start**
 - *Linda Littlefield | Program Manager*



Today's Objectives



1. Understand the major functionality of some of the most commonly-used electronic data systems for Healthy Start grantees
2. Identify which platforms grantees are interested in learning more about, either through the discussion groups or directly from the vendor
3. Identify the types of questions or features grantees would like to explore further in selecting an electronic data system

Background



Why now?

- HS EPIC Electronic Screening Tool (aka Survey Gizmo) will be phased out and shut down on March 31, 2019.
- New funding cycle
- Opportunity for HS programs to learn from current users about their experience using systems



Platform Selection Process

- Platforms featured today selected based on grantee feedback.
 - CoIN survey to understand platforms in use
 - Phone interviews with current EST users to gauge interest in various platforms
 - Feedback from 10/24 vendor webinar
- **Inclusion in this webinar is NOT an endorsement of any one platform or vendor; nor is it to be construed as a recommendation or giving any preferential treatment.**
- Onus remains with grantees to fully vet best vendor for their purposes.

Peer Place



Val Garrison
Rochester Healthy Start

PeerPlace | Overview

Benefits

- **Manage multiple sites**
 - Import standard forms (build on what's already there)
 - View reports by site or for whole program
- **Fully customizable**
 - Case File format and contents
 - Reports and Client Views
 - Validations
 - Consent forms and other attachments
- **Common client profile**
 - Multiple agencies view client information; consent attestation required
 - Confidential Case Files with control over user views ensure PHI protections
- **Electronic screen/refer tool**
 - Automatically process referrals; receive notification of rejected referrals
 - Online referral form
 - Record and track external referrals
- **Encrypted bidirectional data transfer capability**
- **HIPAA Compliant**



PeerPlace | Overview

Healthy Start Specific Features

- **Screening Forms built into Case File**
 - Copy as New feature assists with Update Screens
- **Customized reports export client-level data to CSV templates**
 - <5 minutes to run and download
 - Formatted for use with HSMED XML Conversion Tool



PeerPlace | Overview

Other considerations

- **Cost**

- Initial: Dependent on level of customization, number of programs and users, etc
- Raw data exports significantly less expensive (and faster to run) than system-generated aggregate reports
- Annual: \$359.00 per user per year
- Additional charges may apply for maintaining data connections (e.g., HIO)

- **Time**

- Initial (customized) build can be time-consuming; relatively low input once system is in place
- Initial 1-4 hour training with periodic review seems most helpful for staff
- May require duplicate data entry, but capable of bidirectional data transfer between systems (e.g., medical record or HIO)
- Considering third party data entry to save time and standardize across programs

- **Resources**

- Internet access
- Funding for onboarding, training, and system user fees



PeerPlace | Demo

The screenshot displays the PeerPlace web application interface. At the top, the browser address bar shows the URL <https://connect.peerplace.com/peerplace/ExecuteA.do>. The page header includes the PeerPlace logo with the tagline "the human services connection, NY" and the case information: "Test (test), Test" and "Client ID: 00524-00637-0000111228". On the right side of the header, user details are shown: "User Name: valerie.garrison.perinatal", "Program: Comienzo Sano", and "User Role: Program User, Program Admin". Action buttons for "Push Pin", "Tickler", "History", and "Print" are also present.

The main content area features a table with the following data:

| Case Filed On * | Case Manager * | Status |
|-----------------|------------------|--------|
| 01/24/2018 | Valerie Garrison | Open |

Below the table, there is a section for "Healthy Start Forms" with a list of links: "Demographics", "Pregnancy History", "Preconception Screening", "Prenatal Screening", "Postpartum Screening", and "Interconception Screening". Navigation links for "Search", "Queue", and "Logout" are located to the right of the table.

A left-hand sidebar menu contains the following items: "Case File", "Case Monitor", "Intervention Entry", "Assessment and Goal Plan", "Edinburgh Assessment", "Other Referrals", "Appointments", "Contacts", "Healthy Start Forms" (expanded), "Case Closing", "Attachments", and "Event Profile Sign-Up".

At the bottom of the interface, there are buttons for "Edit", "Exit", "Screen/Refer", and "Delete Form", along with a settings gear icon.



ETO | Social Solutions



Karin Scott
Delta Health Alliance

Efforts to Outcomes - Overview

- Originally selected because of it's ability to track participants across programs and partners.
- Resources needed:
 - Data system administrator (shared across other early childhood programs)
 - ETO administrator training
- Time commitment:
 - Shared staff member for administration
- Staff training:
 - Initial and monthly, ongoing



System Integration with Healthy Start

- Data entry and case management
 - ETO admin built out screening tools in system (40-50 hours)
 - All TouchPoints are fully customizable
 - Each month ETO admin delivers monitoring report to Program Director
 - Reports include quantity (i.e. home visits, at-risk participants), quality (i.e. home visit completion rate) and impact measures (i.e. low birth rate)
- ETO administrator built out custom .csv reports (40-50 hours)
 - Program Director converts to .xls and uploads to HSMED



Example of monthly report

Team Delta Healthy Start,

Please see below for the October 2018 Delta Healthy Start monthly report. This is based on the current caseloads and contact data entered into ETO as of today. Please let me know if you have any questions.

Highlights

- Completion Rate - 90% [+3 percent]
- Dismissed Families - 11
 - 5 graduated/completed services
 - 2 Moved
 - 4 dropped
- Newly Enrolled Families - 19
- Babies Born: 5
 - In September, there were 4 babies born
- Participants with high needs characteristics - 174 [62 percent]
- Participants at-risk for Depression - 0
- Participants at-risk for Domestic Violence - 0
- Site Visit Completion: 2/6

| Delta Healthy Start - Monthly Report | | | | | |
|--------------------------------------|--------------------|-------------|------------------|---------------------------|-----------------|
| Parent Educator | Current Enrollment | Home Visits | Attempted Visits | "High Needs" Roster Count | Completion Rate |
| ██████████ | 42 | 37 | 5 | 26 | 88% |
| ██████████ | 46 | 41 | 5 | 27 | 89% |
| ██████████ | 55 | 49 | 6 | 40 | 89% |
| ██████████ | 49 | 45 | 2 | 32 | 92% |
| ██████████ | 45 | 39 | 6 | 20 | 87% |
| ██████████ | 44 | 41 | 3 | 29 | 93% |
| Totals | 281 | 252 | 27 | 174 | 90% |

System Pros and Cons

- Pros –
 - allows us to track Healthy Start programming within our existing longitudinal data system;
 - Ability to customize dashboards, workflow and reports
 - Web-based system
- Cons –
 - cost/time to build out and maintain system;
 - custom report build out requires additional training for ETO admin or high cost to contract directly with Social Solutions
 - Features not always compatible with Apple products

Questions?



Key Takeaways

1. HS programs have many options and functionalities to consider when selecting a new data platform.
2. The best approach for confirming whether a platform is appropriate for your program is to speak directly with a vendor.
3. Grantees can access peer guidance and resources from the HS EPIC Center to provide background research.

