DAISEY for KDHE

Bureau of Family Health

KU CENTER FOR PUBLIC PARTNERSHIPS & RESEARCH
The University of Kansas

About Us

KU CENTER FOR PUBLIC PARTNERSHIPS & RESEARCH
The University of Kansas

- Designated center under the Achievement & Assessment Institute at the University of Kansas with 61 professional full-time staff members – PhD, MSW, BS

- ***Multidisciplinary team*** in psychology, social welfare, sociology, education, and public health
- ***Expertise in translating research to practice*** across sectors serving children, youth and families
- Expertise in ***shared measurement systems*** and ***large-scale data initiatives***
- **Our mission** is to **optimize the well-being of at risk children, youth, and families** by generating responsive solutions that improve practice, inform policy, and advance knowledge

Supporting Collective Impact of Family Health Programs

Collective Impact – Local, Regional, State

Collective Impact Components	Relationship to KDHE Family Health Programs and Services
Common Agenda	Title V envisions a nation where all mothers, children and youth, including CSHCN, and their families are healthy and thriving
Mutually Reinforcing Activities	Child Care, PMI, Breastfeeding Peer Counselor, Title X Family Planning, WIC, STD/HIV, Community Based Primary Care, MCH, SHCN, TPTCM, CDRR, HSHV, PREP, Immunization
Continuous Communication	Monthly reporting, quarterly Aid to Local meetings, regional meetings, local service delivery among partners
Backbone Support	Bureau of Family Health, Maternal Child Health Team
Shared Measurement	Opportunity to build infrastructure and measure impact with DAISEY

What is Shared Measurement?

Shared measurement has been defined as the "*use of a common set of measures to monitor performance, track progress towards outcomes and learn what is and is not working in the group's collective approach.*"

Shared measures allow an initiative to:

- Improve Data Quality
- Track Progress Toward a Shared Goal
- Enable Coordination and Collaboration
- Learn and Course Correct
- Catalyze Action

Vision for Shared Measurement

- We feel a responsibility to empower and encourage others to seek AND see the difference they are making in the lives of at-risk children, youth, and families

- We advocate for data and shared measurement to be a part of the solution, not a part of the problem - aligning efforts, finding efficiencies, acknowledging context, facilitating change

- We help shift mindset and change – our focus is on relationship building, impact, quality, and practice. Data systems are tools we use, people define how they can best use those tools.

What is DAISEY?

DAISEY is a shared measurement system designed by social scientists to help communities see the difference they are making in the lives of at-risk children, youth, and families.

DAISEY

connecting the first five years to a lifetime of success

Why DAISEY for KDHE Grantees?

- KDHE needed an easy-to-use data tool to help bring together information in one place from a large number of diverse organizations providing an array of KDHE-funded services and programming.

- In line with vision to improve and transform the capacity and ability of KDHE and its local partners to demonstrate the impact of funded Family Health programming on children, youth, and families served.

- Simplify reporting process, find efficiencies where possible, and provide infrastructure and support to local partners.

Why DAISEY for KDHE Grantees?

DAISEY provides a single secure place for KDHE funded Family Health programs to enter all data required for state and federal reporting.

DAISEY empowers agencies to enhance coordinated Family Health services by sharing information within an agency or community.

How is DAISEY different from existing systems?

Many agencies or organizations have case management or electronic medical/health record (EMR/EMH) systems to support client management, billing, or scheduling. Their purpose is local level operations and management.

DAISEY is not a client medical record or case management system. DAISEY is not a scheduling or billing system. DAISEY will not replace existing systems that serve these functions.

How is DAISEY different from existing systems?

DAISEY is designed to meet KDHE's need for certain information and data on Family Health services provided by funded programs. The purpose is multi-organizational shared measurement and outcome analysis.

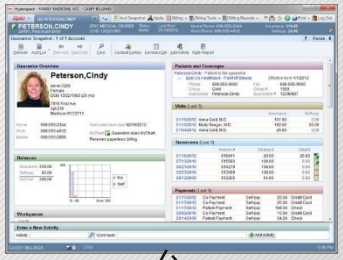
DAISEY will only require limited information from existing systems (e.g., demographic info, dates of services) to aggregate across local agencies for state-level reporting and analysis.

Bringing Information Together

Data Everywhere!

Desktop Data System
(e.g., Excel, KIPHS)

Program B



Agency-selected
EMR system

Program
A

Paper
records

Program
A

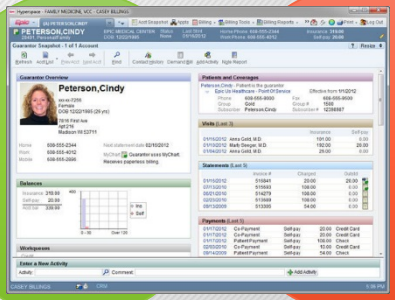
Program B

Health Dept

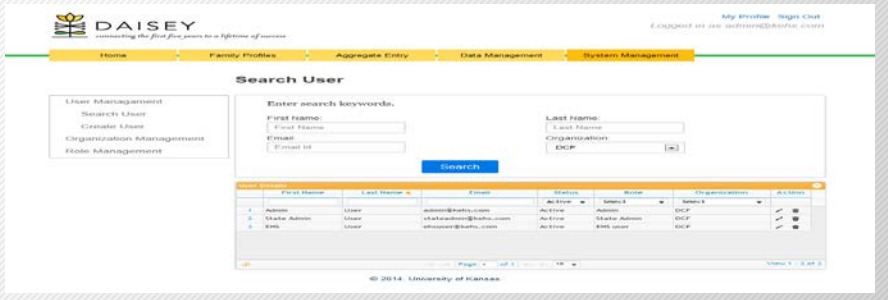
Shared Measurement!

Paper records

Desktop Data System (e.g., Excel, KIPHS)



Web-based EMR/EMH system



DAISEY brings together a limited set of common elements from all existing data collection options across all programs and organizations

Sharing Information to Improve Services

Kansas Family Health Communities are Diverse

Some communities have one Health Department that delivers all funded Family Health programs

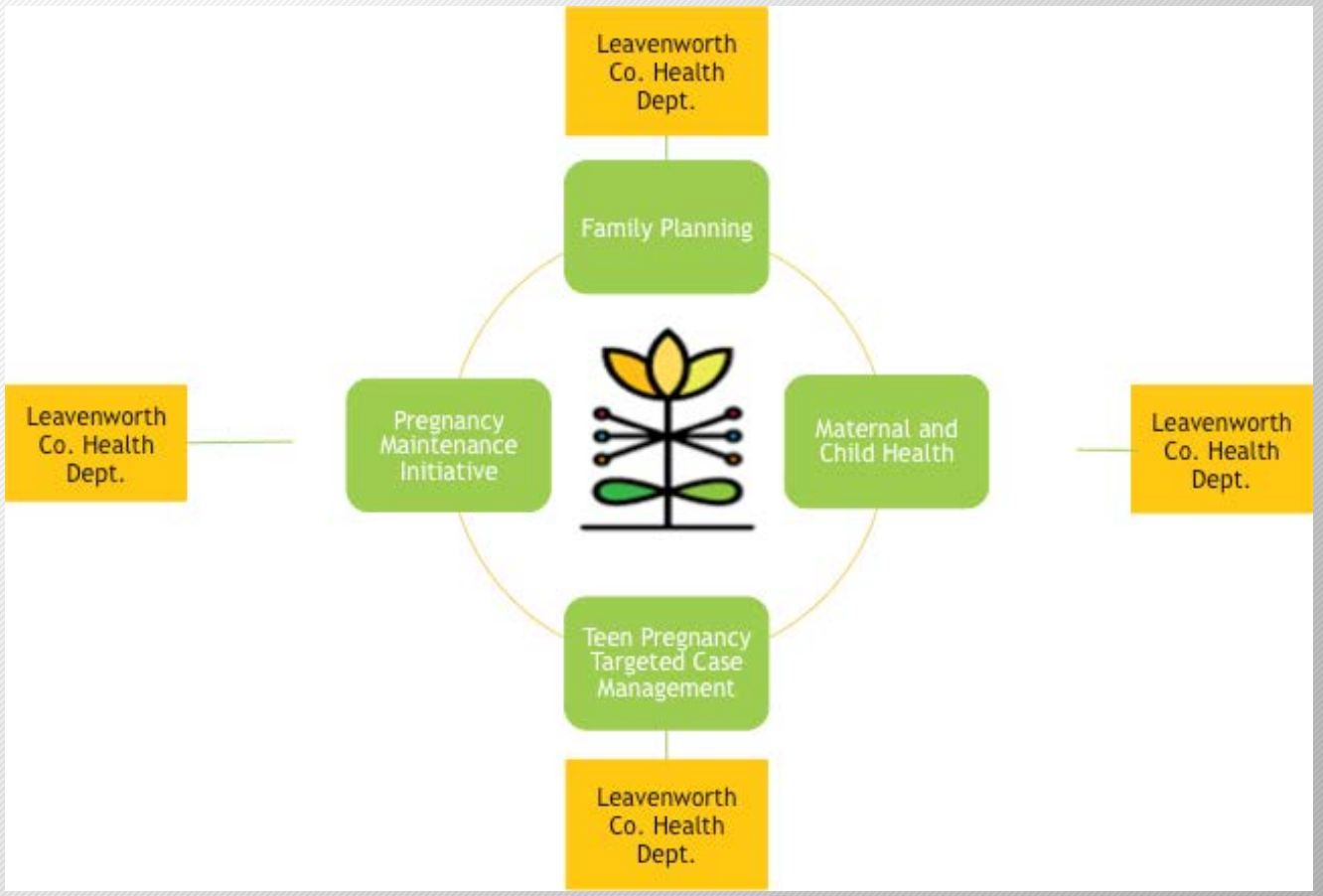
Some communities have multiple partners who deliver funded Family Health programs

For services to follow the family, communities are enabled to share information within an organization and between organizations and streamline reporting procedures

Single Agency Community Example: Leavenworth

DAISEY can provide a Health Dept delivering all KDHE funded programs a shared measurement system to assess the impact of all services and assist coordinating care.

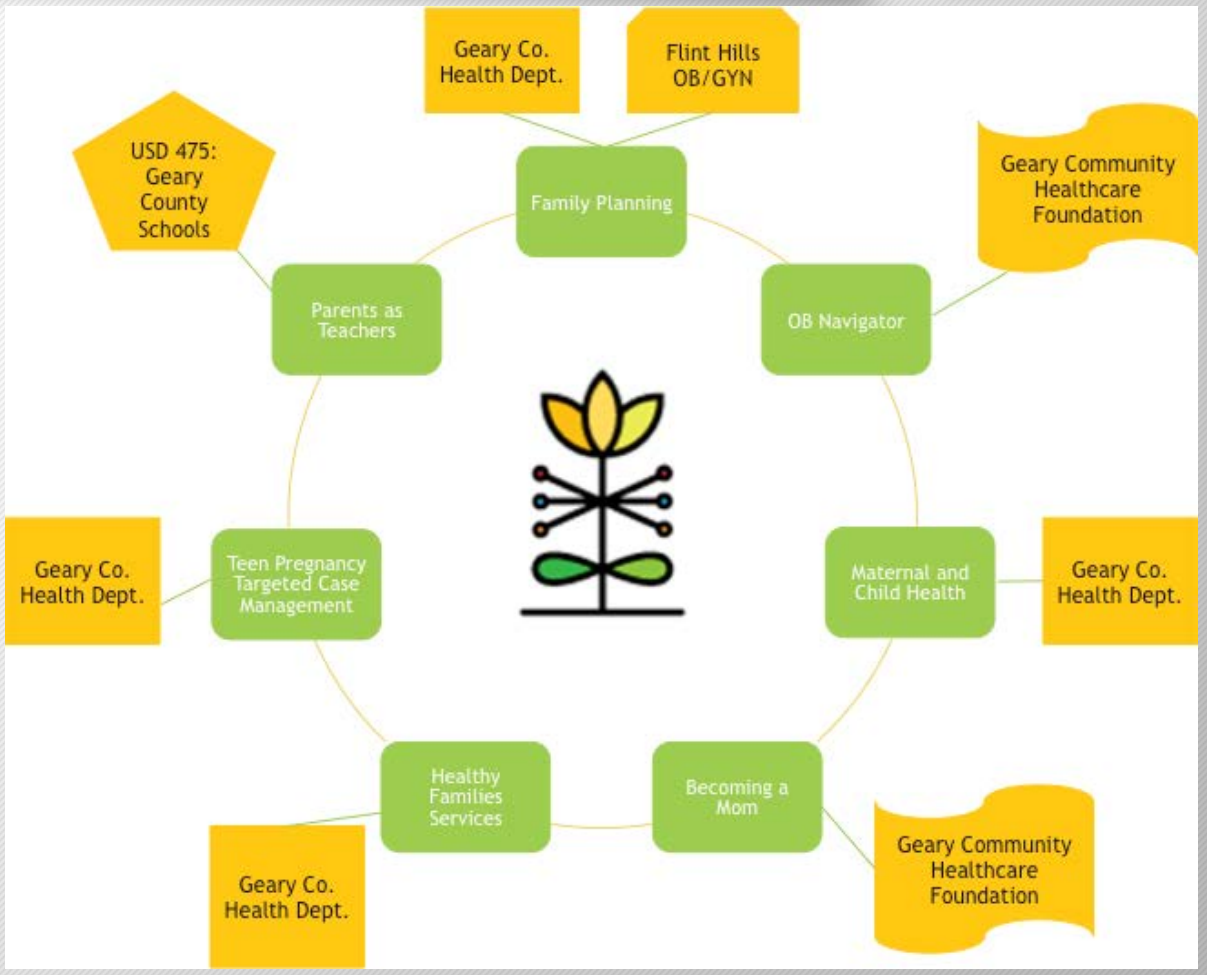
DAISEY also gives a Health Dept one place to gather and report all federal and state required data to KDHE



Multi-Partner Community Example: Geary

DAISEY can allow all partners to share client and service information to better coordinate, monitor, and assess impact across multiple partners

DAISEY also gives all partners one place to gather and report all federal and state required data to KDHE



How DAISEY Works

Basic DAISEY Design and Functionality

Create or Search a Demographic **Profile** of Adult or Child Receiving Services

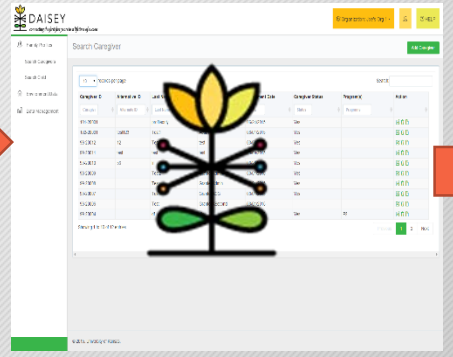
Step 1

Capture Information About Type of Services Received at Each **Visit** or Client Encounter

Step 2

Capture More Detailed Information About **Program Services and Referrals**

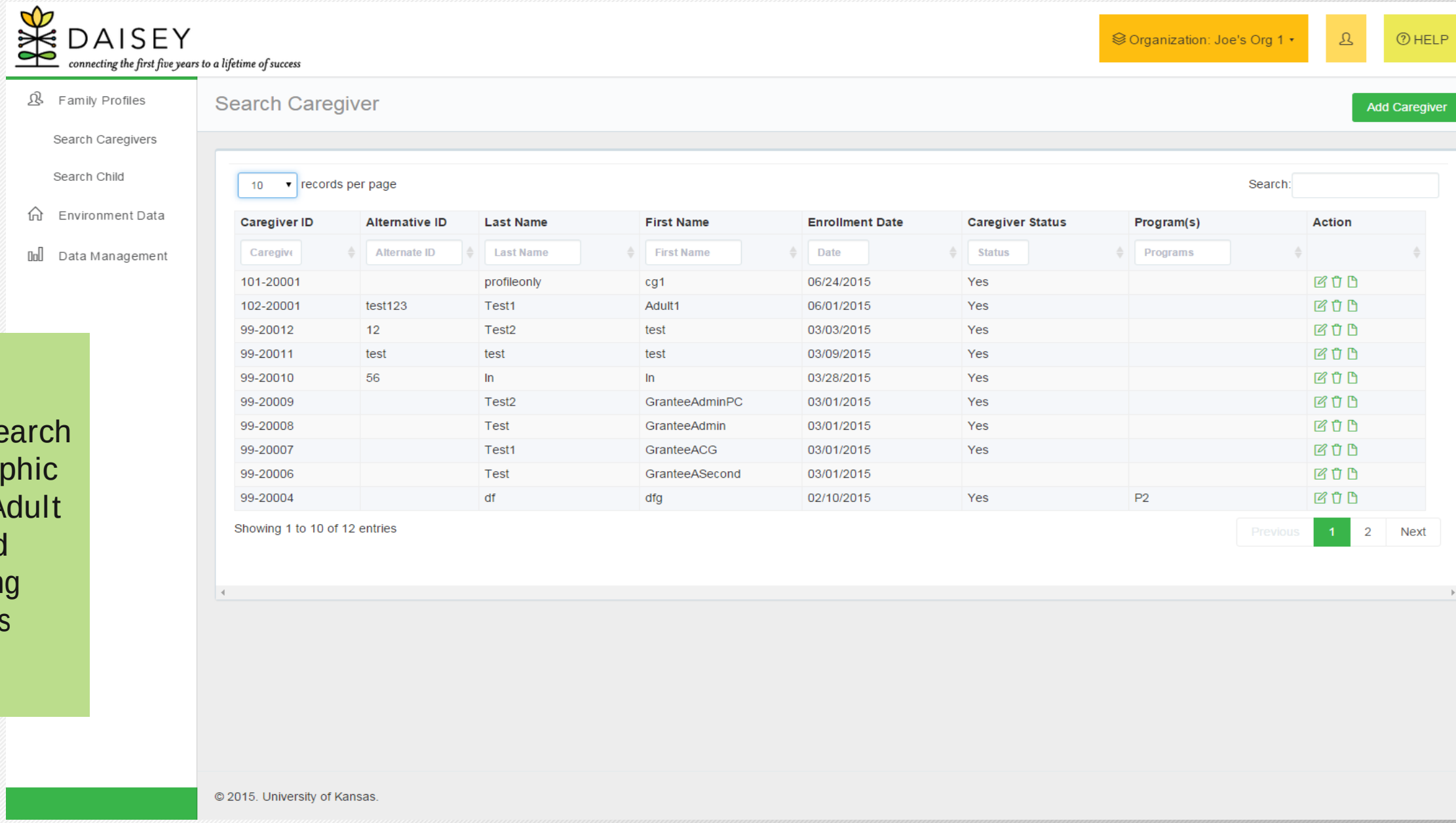
Step 3



Shared Measurement of All Client Info, Visits and Services

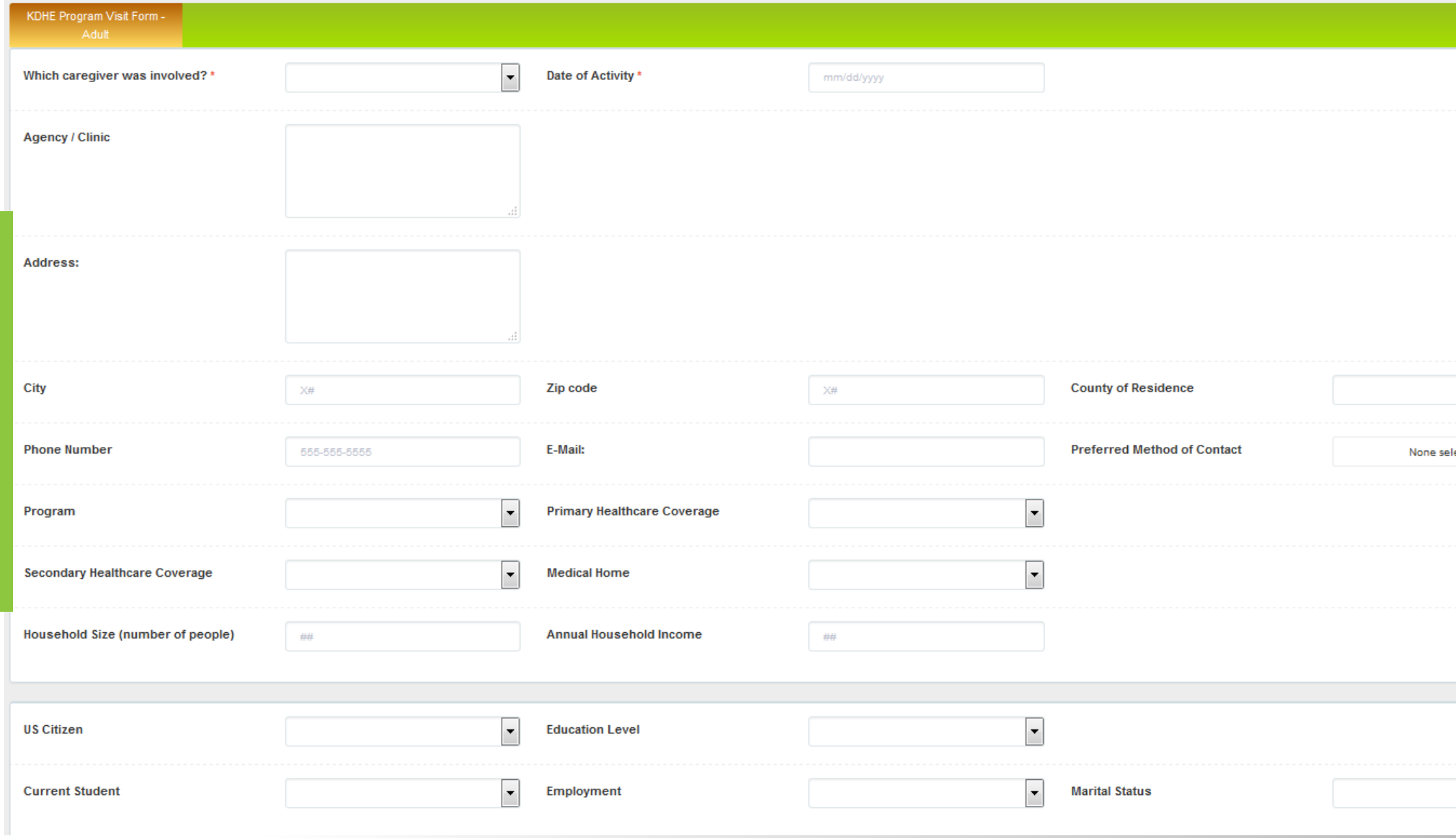
Generate Reports on Clients, Services provided, Referrals Made

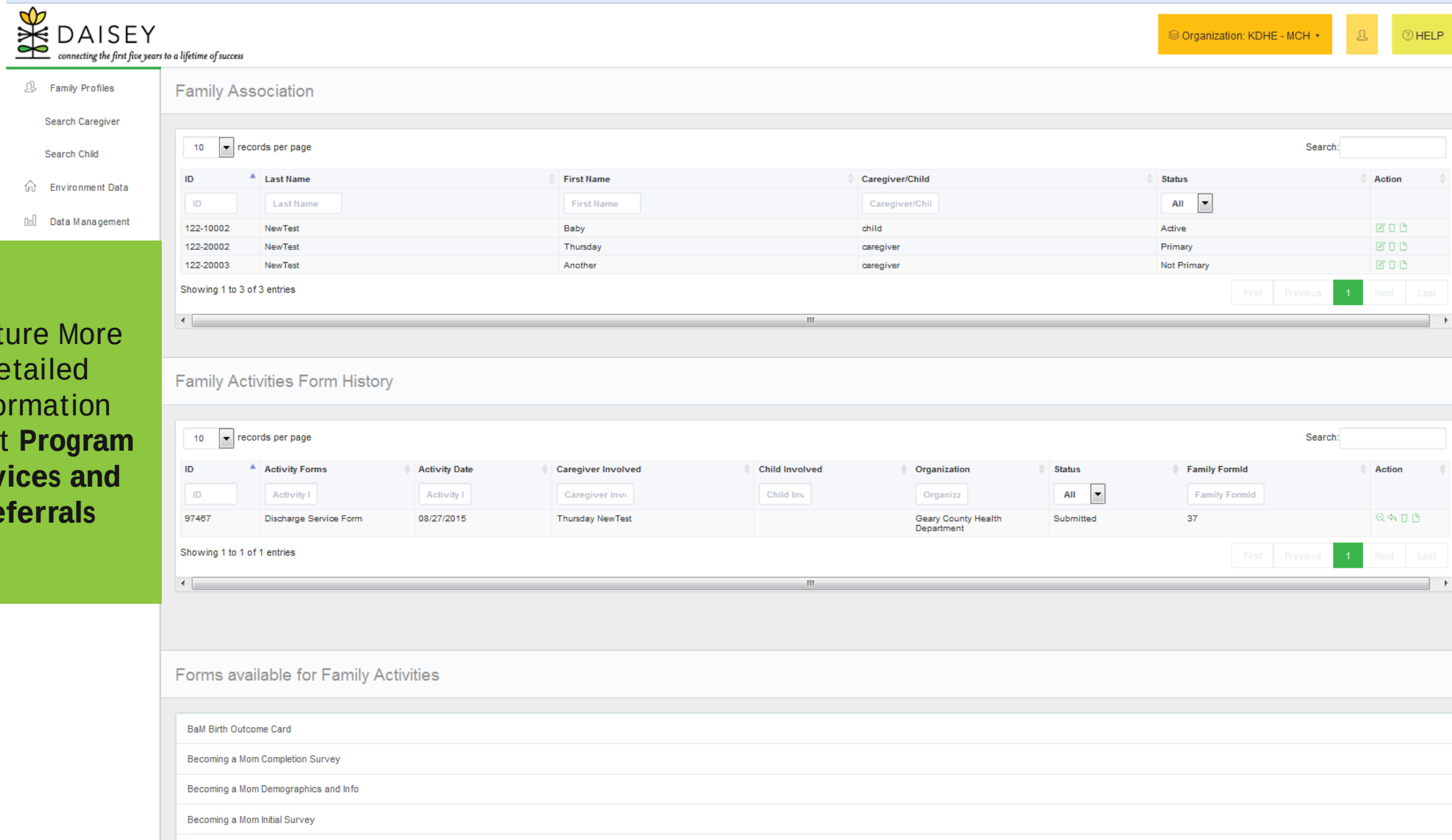
Step 4



Create or Search a Demographic **Profile** of Adult or Child Receiving Services

Capture Information About Type of Services Received at Each **Visit** or Client Encounter





Capture More Detailed Information About **Program Services and Referrals**

DAISEY
connecting the first five years to a lifetime of success

Family Profiles | Environment Data | Data Management

Ms. Trainer Profile | Help | Sign Out
Initiative: ECBG
Grantee: DAISEY Training
Organization: DAISEY Training
Role: Program Admin

- Data Management
  - Import
    - Import Data
    - Data Templates
    - ID Reports
  - Export
    - Export Data
  - Intelligent Reports
    - ADMIN
    - COMMONMEASURES

Intelligent Report

Showing page 1 of 1 — Go to page:

DAISEY

Family Demographics Report

Date Range: 01/01/2000 to 01/01/2020

Caregiver Demographics

Summary	Count	%
Total Caregivers	40	100%
Total Primary Caregivers	32	80%
Total Associated Caregivers	8	20%

Age	Count	%
15 years old and younger	1	3%
16-18 years old	0	0%
19-21 years old	0	0%
22-25 years old	7	18%
26-30 years old	6	15%
31-40 years old	26	65%
41-50 years old	0	0%
51-60 years old	0	0%
61 years old and older	0	0%
Not Answered	0	0%
Total	40	100%

Sex	Count	%
Female	24	60%
Male	12	30%
Not Answered	4	10%
Total	40	100%

Ethnicity	Count	%
Hispanic/Latino/Spanish Origin	5	13%
Non-Hispanic/Non-Latino/Not Spanish Origin	31	78%
Not Answered	4	10%
Total	40	100%

Race	Count	%
African American or Black	13	30%
American Indian or Alaska Native	0	0%
Asian	1	2%
Native Hawaiian or Other Pacific Islander	3	7%
White	19	43%
Other	4	9%
Not Answered	4	9%
Total	44	100%

Education	Count	%
Currently enrolled in high school	2	5%
Of high school age not enrolled	2	5%

Employment Status	Count	%
Employed Full -Time	13	33%
Employed Part -Time	9	23%
Not Employed	6	15%
Unknown	8	20%
Not Answered	4	10%
Total	40	100%

Military Status	Count	%
Current Armed Forces Member	2	5%
Former Armed Forces Member	1	3%
None	16	40%
Unknown/Not Collected	20	50%
Not Answered	1	3%
Total	40	100%

Insurance Status	Count	%
Medicaid/State Children Insurance Program (Title XXI/KanCare)	1	3%
No Insurance Coverage	12	30%
Private or Other	6	15%
Tri-Care(military Insurance)	2	5%
Unknown	15	38%
Not Answered	4	10%
Total	40	100%

Primary Language English?	Count	%
Yes	29	73%
No	5	13%
Not Collected	1	3%
Not Answered	5	13%
	40	100%

Primary Language	Count	%
English	31	78%
Arabic	2	5%
Chinese	0	0%
French	1	3%
Italian	0	0%

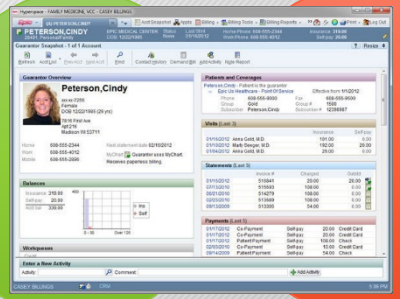
Generate Reports on Clients, Services provided, Referrals Made

How Will DAISEY Work at Our Organization?

What is your current capacity?

Paper records

Desktop Data System (e.g., Excel, KIPHS)



Web-based EMR/EMH system

How do you collect the information required by all Family Health programs now?

What Will Work for You?

KU-CPPR will provide tools to help you conduct a self-assessment of workflow and data collection needs and resources.

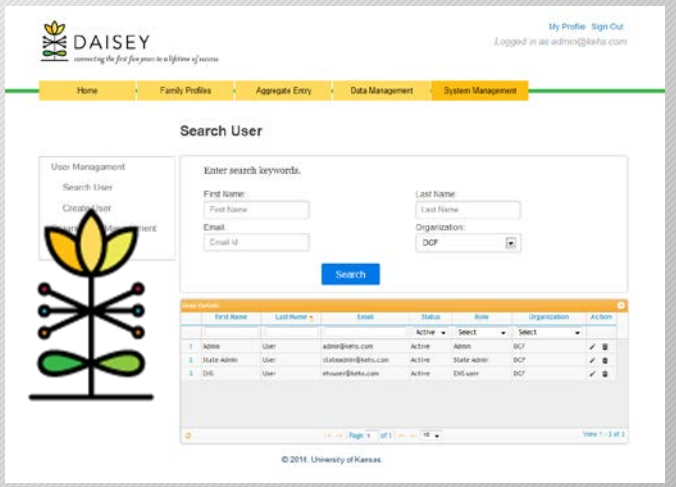
Based on the assessment, KU-CPPR can make recommendations and provide guidance on integrating DAISEY into current data collection workflow or revamping the workflow to maximize efficiency.

Targeted technical assistance and consultation will be available to help organizations make decisions about what works best for you to get information into DAISEY for KDHE requirements

What will build our capacity?

Paper records

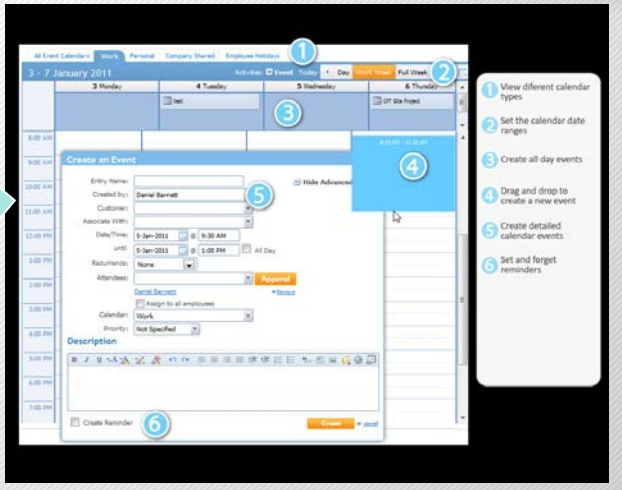
Abandon paper records and go completely online to DAISEY



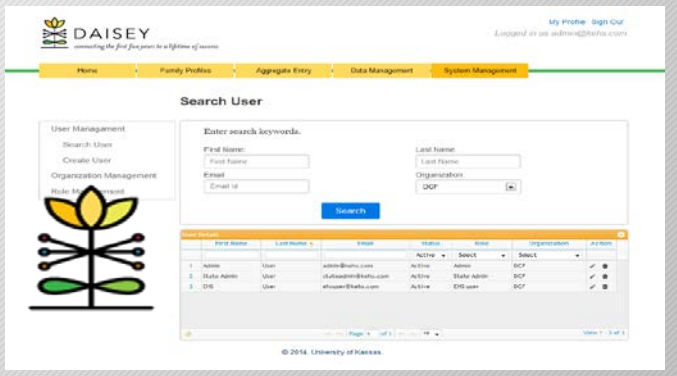
What do we need?

Desktop Data System
(e.g., Excel, KIPHS)

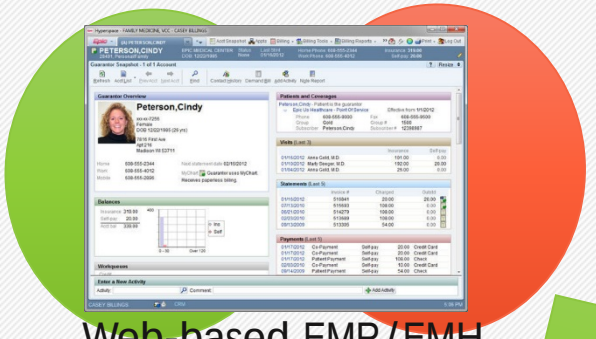
Keep organizational functions like calendaring, billing in existing systems



Use DAISEY for KDHE reporting requirements

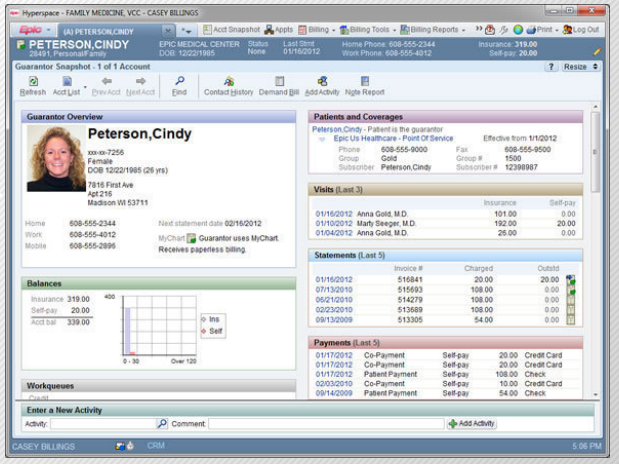


What is most efficient?

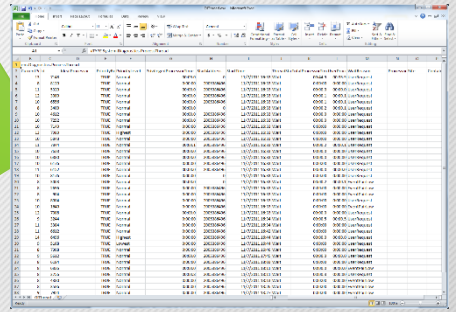


Web-based EMR/EMH system

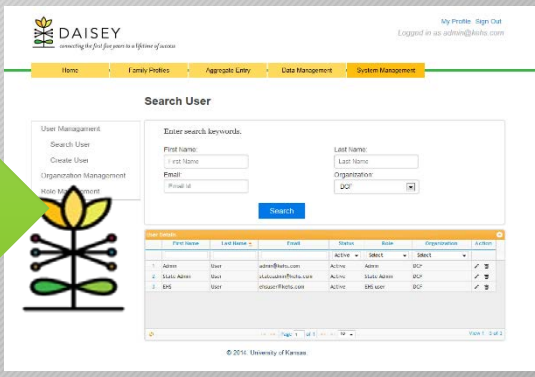
Keep organizational functions like client records, calendaring, billing in existing systems



Export only elements needed for Family Health program reporting



Import your required data into DAISEY



Data Security and Confidentiality

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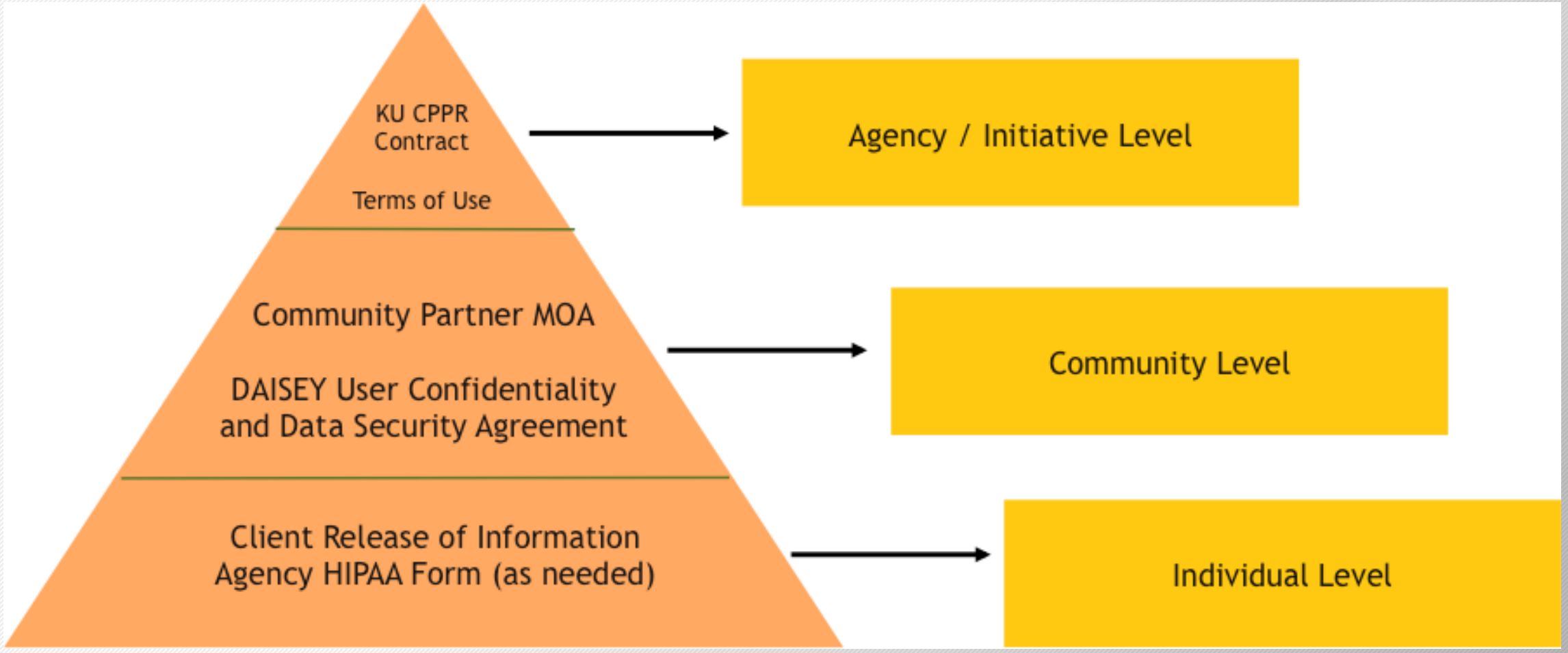

Training and Technical Assistance

KU-CPPR is committed to providing a high level of training and technical assistance supporting the implementation and maintenance of DAISEY for KDHE funded programs

Basic web-based training on DAISEY system functionality and topical trainings on importing data, filling out forms, creating reports

DAISEY user manuals, webcasts and system walkthroughs, implementation guide, targeted phone support, dedicated email support

Frequently Asked Questions

FAQ

What does DAISEY add to our organization?

- A system to track your contact with clients
- A system that captures your state and federal reporting requirements
- A tool for coordinating practice and services
- A mechanism for collecting and analyzing data for program/service improvement, community outreach and local reporting

FAQ

What about the EHR or EMR system my organization currently uses?

The flexibility of your EMH/EHR will determine whether you should:

- **Fully replace the existing system with DAISEY** (e.g., none of the required reporting elements are or will be in your EMH/EHR system)
- **Enter data into an existing system, extract it and import it into DAISE**Y (e.g., your existing system contains all KDHE required data elements)
- **Enter some data into the existing system and some into DAISEY** (e.g., your existing system contains only some of the required KDHE data elements)

FAQ

Will I (or my staff) have to enter the same information into two different systems (dual entry)?

- That depends on the decisions your organization makes – there shouldn't be a need for dual entry since the DAISEY import function can be used to upload data from your system into DAISEY.

FAQ

Will we have access to the information in DAISEY for program and service improvement purposes or local reporting?

Yes. You can export data onto a spreadsheet from DAISEY for any forms that you enter data into for further analysis.

Reports will also be built into DAISEY over time for users to access their information

FAQ

Why is DAISEY being rolled out to different sites at different times?

A phased rollout approach maximizes training and technical assistance that can be provided to each site. It also allows for implementation lessons to be learned at a pilot site and adjustments made as necessary.

Questions