



# Service Tracking and Data Integration Foundational Track

Emily Newton | April 8, 2024



# Indigenous Land Acknowledgement

- We respectfully acknowledge that we live and work in territories where indigenous nations and tribal groups are traditional stewards of the land. Our California office resides in Tongva territory.
- Please join us in supporting efforts to affirm tribal sovereignty across what is now known as California and in displaying respect, honor, and gratitude for all indigenous people.

### Whose land are you on?

Option 1: Text your ZIP code to 1-907-312-5085

Option 2: Enter your location at Native Land CA

Option 3: Access Native Land website via QR Code



# **Community Agreements**

- Be present and be an active listener.
- One mic, one voice.
- Practice inclusivity.
- Honor pronouns and gender identity.
- Show respect (this may look different for each person).
- Allow conflicting perspectives to exist.
- Assume best intentions.
- Take space, make space.
- Share what you are comfortable sharing.
- Protect individual privacy.
- Practice self-care.
- Encourage growth of self and for others.
- Support resource sharing.



# April Two-Track Event Details (4/8/24)

| Service Tracking and Data Integration |   |  |
|---------------------------------------|---|--|
| Category                              | Foundational Track  | Advanced Track   |
| Learning<br>Goals                     | <ul> <li>Know the difference between qualitative and quantitative data collection and how to manage both.</li> <li>Understand how service tracking data can be streamlined toward future funding such as billing Medi-Cal.</li> <li>Have a grasp on best practices for ethical data collection.</li> <li>Be familiar with different data management tools (data variables they use in their Recovery Data Platform (RDP)).</li> </ul> | <ul> <li>Understand how service tracking data can be streamlined toward future funding such as billing Medi-Cal.</li> <li>Be able to consider how to combine data with partnering organizations to advocate for systems change.</li> <li>Understand best practices in protecting clients' information, such as who is analyzing the data and how the data is used to tell a story (respecting intersectionality of experience; people are more than their experiences/diagnosis).</li> <li>Be familiar with different data management tools (data variables they use in their RDP).</li> </ul> |
| Target<br>Audience                    | <ul> <li>Staff who are new to service tracking and data<br/>management tools and techniques.</li> </ul>   | <ul> <li>Staff who have an established database system and<br/>several years of experience in data management.</li> </ul>  |



**HCS** 

### **Emily Newton**

- She/Her Pronouns
- Person in Long-Term Recovery
- Chief Development Officer for Prevention Links
- Pursuing My M.B.A.
- B.A. in Psychology
- Led RDP Pilot in New Jersey
- Youth Advisory Board Member

# **Learning Objectives**

# By the end of this presentation, you will understand:

- The difference between qualitative and quantitative data and how to collect both.
- Comparison and/or recommendations of data management tools (data variables used in RDP platform).
- Data ethics: considering questions being asked and engaging with clients to gather data.
- The importance of service tracking for future funding, such as billing Medi-Cal.



# **Definitions**

#### **Service Tracking**

- Documentation of services provided
- Documentation of individuals served (Miso3, n.d.)

#### **Data Integration**

- The organizational procedures developed to integrate documentations as a part of service delivery
- Bringing data together for other purposes (Qlik, n.d.)

#### **Types of Data**

- Quantitative
- Qualitative



# If you don't document it, then it didn't happen!

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Andrews & St. Aubyn, 2015



# **Collecting Data**

- Intake
- Surveys
- Service Delivery
- Service Feedback
- Testimonials

#### QUANTITATIVE

#Phone calls
#Groups/events held
Duration of session
Length of service
#Referrals given
Pre/post numerical surveys
#Meetings attended
#Outreach attempts
#Tabling events
Duration of recovery

BOTH

Age Address/county of residence Gender Employment status Criminal justice status SUD history Immigration status Referral source Referrals given Service provider Outreach locations

#### QUALITATIVE

Name Alias Date of birth Contact information Testimonials Case notes Family history & info Participant progress on goals Service plans Open-ended surveys Diagnosis\*\*

### **Data Collection Tools**

#### **Excel, Google Sheets**

#### Pros:

- Able to organize data
- Fully customizable
- Low cost

#### Cons:

- Data is often not in one single place/sheet
- Not always accessible from anywhere
- Difficult to manage large data sets
- Not always HIPAA compliant
- Hard to manage access to the information

#### (Natter, 2019)

#### **Cloud-Based Software**

#### Pros:

- Data is in one place
- Reports can be generated to pull data from different places within the system
- Can be customizable
- Can manage access for different users
- HIPAA compliant
- Access from anywhere
- Scalability

#### Cons:

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- High cost
- Staff training
- Finding the right system
- Technical expertise needed to navigate reporting functions

(Pisuwala, 2023)

# **Choosing a Data Management System**

### Things to Keep in Mind:

• Budget availability

Customization

Agency size

- Agency needs
- Data collection needs
- HIPAA compliance

### **Example Systems**

- Excel (Microsoft 365 Business)
  - $\circ~$  Starts at \$6 per user per month
- <u>SalesForce (Service Tracking)</u>
  - Starts at \$25 per user per month
- <u>Community CareLink</u>
  - Starts at \$8,000 annually
- <u>Recovery Data Platform (RDP)</u>
  - Starts at \$12.50 per user/per month for RDP plus addons (Same Day Support, etc.)
- <u>RecoveryLink</u>
  - Starts at \$450 per month for 5 users, \$80 per month per additional user



### **Workflow of Data**



- Documentation System
- Timeframes for Documentation of Services
- Completion of Documentation
- Report Generation
- Staff Training for Service Delivery Integration
- Confidentiality and Consent Forms



### **Ethics of Data**

### HIPAA Compliance: 42 CFR Part 2

• The <u>Part 2 statute</u> (42 U.S.C. 290dd-2) protects "[r]ecords of the identity, diagnosis, prognosis, or treatment of any patient which are maintained in connection with the performance of any program or activity relating to substance use disorder education, prevention, training, treatment, rehabilitation, or research, which is conducted, regulated, or directly or indirectly assisted by any department or agency of the United States." (HHS, 2024)

#### **New Rule:**

- Single consent
- Public health authorities
- Court settings
- SUD counselling notes
- Breach notifications, penalties, investigative practices (HHS, 2024)

#### **State and Funder Ethics Requirements**

#### **Ethics of Providing and Documenting Remote Services**

(HHS, n.d.)

# **Beyond Grant Reports**

### **Funding Solicitation**

- Government grant applications
- Foundation grant applications
- Fundraising efforts
- Donor stewardship
- Annual report
- Medi-Cal billing

### **Brand Awareness**

- Annual report
- Social media
- Newsletters

- Ticketed community events
- Fee-for-service programming



# **Learning Objectives Review**

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# Thank You

### Resources

#### **Best Practices for Peers and Documentation**

- Best Practice Guidelines for Employing Certified Medi-Cal Peer Support Specialists
- Guideline for Best Practices: Peer Recovery Support Services
- SAMHSA Recovery Support Tools and Resources
- The Ultimate Guide for Nonprofit Data Collection

#### **Data Collection Assessments and Tools**

- <u>CSAT GPRA Modernization Act Data Collection Tools</u>
- NIDA Screening and Assessment Tools
- Peers for Progress Data Collection Measures Guide
- <u>Recovery Research Institute Outcome Measurement Tools</u>

#### **Data Collection Platform Guidance**

- Guidelines for Collecting Data in Excel
- <u>Considerations for Choosing a Cloud-Based Data Platform</u>

#### **Navigating HIPAA Requirements**

- <u>SAMHSA Applying Substance Use Confidentiality Regulations</u>
- HHS Health Information Privacy



### Citations

Miso3. (n.d.). What is service tracking?

Qlik. (n.d.). *Data integration*.

Macalester College Library. (n.d.). Qualitative vs. quantitative. In Data module #1: What is research data?

Andrews, A., & St Aubyn, B. (2015). <u>'If it's not written down; it didn't happen...</u> JCN, 29(5), 20-22.

QuestionPro. (n.d.). *Data collection methods: Sources & examples*.

Natter, E. (2019, January 25). *The advantages & disadvantage of spreadsheets*. Chron.

Pisuwala, U. (2023, March 9). Pros & cons of cloud computing in healthcare. Peerbits.

U.S. Department of Health and Human Services. (n.d.). <u>HIPAA for professionals</u>.

42 CFR Part 2—<u>Confidentiality of Substance Use Disorder Patient Records</u>.

U.S. Department of Health and Human Services. (2024, February 8). Fact Sheet 42 CFR Part 2 Final Rule.