



Office of Children and Family Services

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CCWIS Local Systems Survey Results

OCFS sent out a survey to all NYS local districts and voluntary agencies to get an understanding of automated systems related to child welfare in use outside of the statewide CONNECTIONS system. This information is required in order to meet the data exchange requirements of the federal Comprehensive Child Welfare Information System (CCWIS) regulations.

Survey timeframe: Sent mid-December 2018; closed end-January 2019

Response Rates

Total 234 LDSS and VAs contacted – 135 responded; **58% overall response rate**

52 out of 59 **LDSS** responded (88% response rate)

- 11 (21%) have no local child welfare system outside CONNECTIONS
- 41 (79%) have at least one local child welfare system outside CONNECTIONS
 - 11 (21%) have 1 system
 - 16 (31%) have 2-3 systems
 - 10 (19%) have 4-9 systems
 - 4 (8%) have 10 or more systems

83 out of 175 **VAs** responded (47% response rate)

- 33 (40%) have no local child welfare system outside CONNECTIONS
- 50 (60%) have at least one local child welfare system outside CONNECTIONS
 - 29 (35%) have 1 system
 - 15 (18%) have 2-3 systems
 - 6 (7%) have 4-9 systems

Out of 175 VAs, 84 are Foster Care agencies and 91 are Preventive-Only agencies.

51 out of 84 **Foster Care VAs** responded (61% response rate)

- 11 (22%) have no local child welfare system outside CONNECTIONS
- 40 (78%) have at least one local child welfare system outside CONNECTIONS
 - 21 (41%) have 1 system
 - 13 (25%) have 2-3 systems
 - 6 (12%) have 4-9 systems

33 out of 91 **Preventive VAs** responded (36% response rate)

- 22 (67%) have no local child welfare system outside CONNECTIONS
- 11 (33%) have at least one local child welfare system outside CONNECTIONS
 - 9 (27%) have 1 system
 - 2 (6%) have 2-3 systems

Number of Local Systems

284 systems identified

- 10 to be decommissioned in near future
- 265 currently in use and 8 more planned, for a total of **274 to consider**
- **206 unique systems**

Categories and Observations based on Survey Responses

Out of the 274 systems (please consider each number below to be approximate; many systems can be categorized several ways so the reviewer subjectively counted them in the seemingly primary category):

Duplicate Data Entry:

- 115 systems **require duplicate data entry** with CONNX
 - Another 47 systems import data from CONNX/ODS (mostly NYC ACS, plus 7 other LDSS and 3 VAs; others are pending approval)

System Purpose:

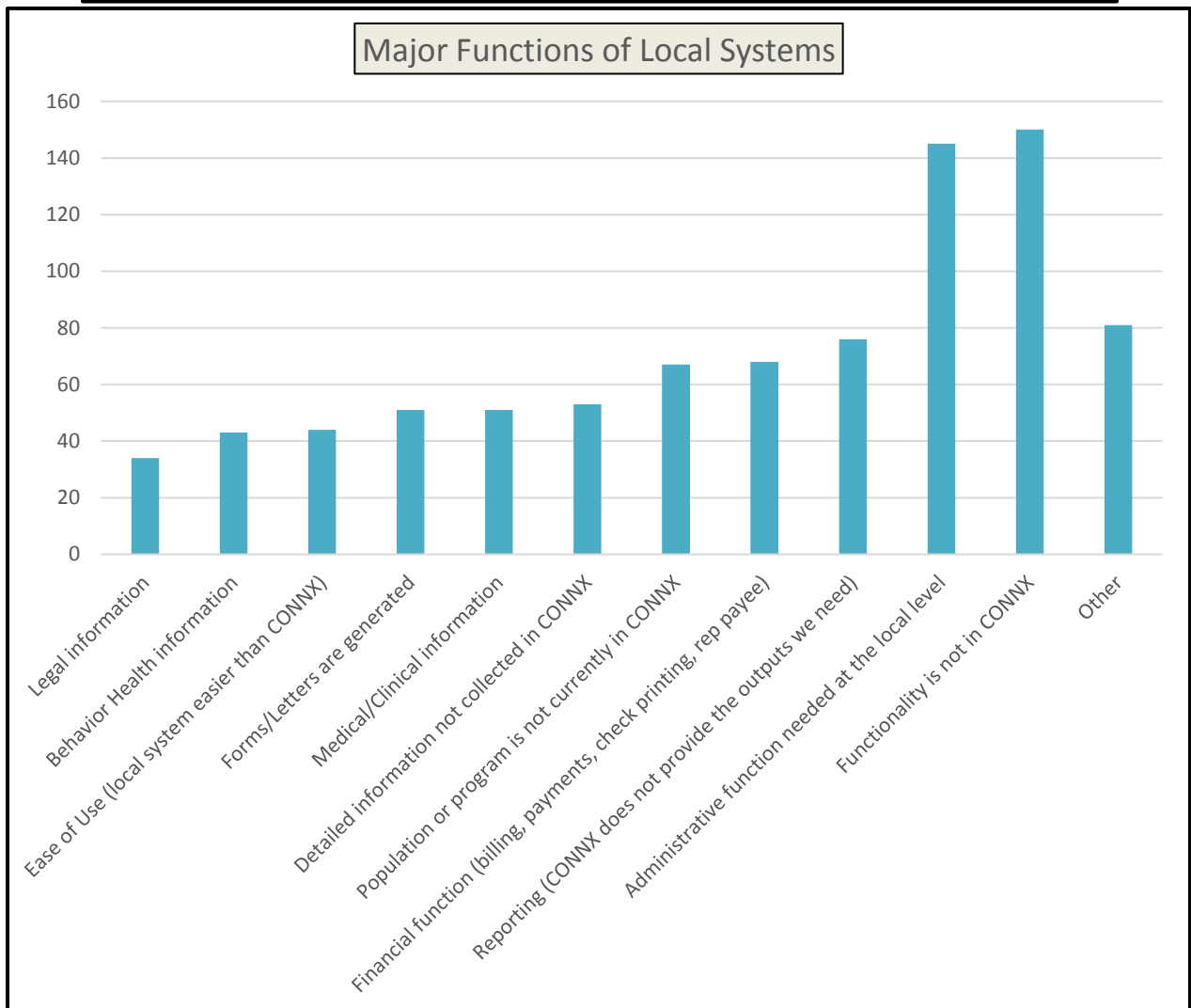
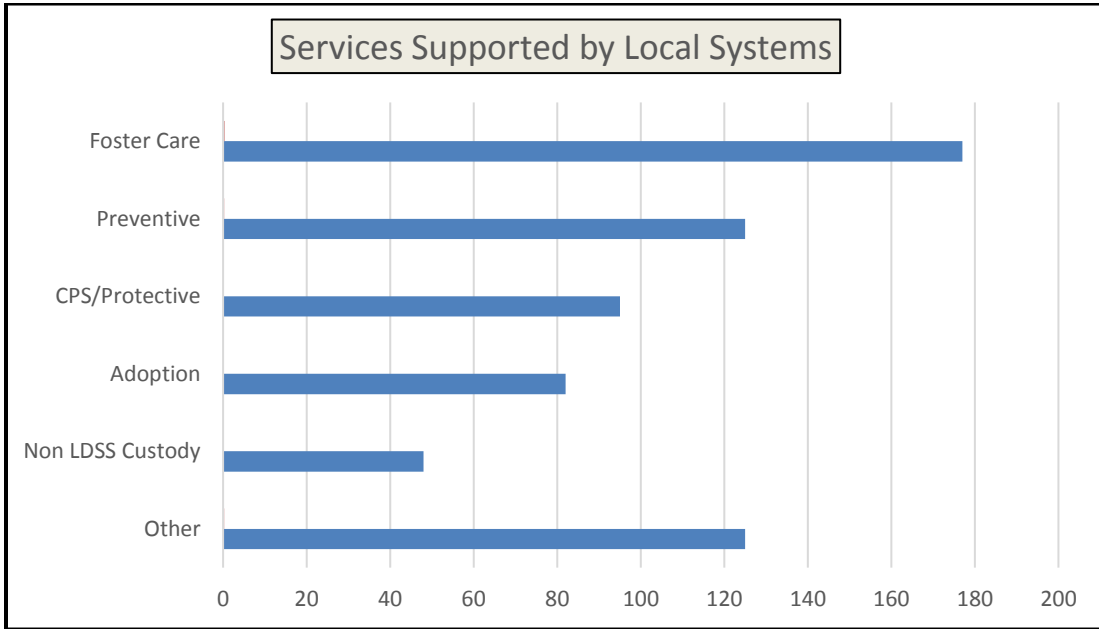
- 82 systems are used for some type of **local case tracking support**:
 - “Case tracking” refers to a large variety of systems apparently used to keep track locally of information (or related information) from the system of record (CONNECTIONS or in a few cases, WMS). Examples include: what youth are in what foster homes; key dates; referrals; assignment and tracking of case numbers for intakes; court petitions; fatalities; case lists; demographics; and more.
 - 24 LDSS reported 64 different case tracking systems. At least 15 systems are CPS/Intake related.
 - 17 VAs reported 18 tracking systems
 - At least 30 of the 82 systems are Excel spreadsheets or Access databases.
 - *These systems need to be evaluated to see if they can be replaced by functionality within CONNECTIONS and/or reports or a dashboard solution.*
- 73 systems support local **reporting** needs.
 - *These reporting solutions need to be reviewed to determine if CONNECTIONS or the OCFS DW can meet these reporting needs.*
- 66 systems serve a **financial function**/payment/billing/rep payee/check printing
 - 10 of which are noted to be primarily medical/clinical record systems
 - *Some of these systems will likely require an interface with CONNECTIONS.*
- 16 LDSS and 1 VA are using a **document imaging-related system**
 - 8 specified using **OnBase**; several referenced other Northwoods systems
 - *CONNECTIONS will be deploying a document uploads function in 2019; a data exchange will need to be evaluated with OnBase and other document storage systems.*
- 50 systems collect **medical/clinical information**
 - 10 of which also note inclusion of a financial function
 - 3 LDSS and 24 VAs are using systems primarily for **Health/clinical record management**
 - *These systems will likely require an interface with CONNECTIONS*
- 23 VAs report using **MyEvolv/NetSmart**
 - 10 of which specifically note for health record management
 - *These systems need to be evaluated for duplication with CONNECTIONS; a data interface is likely to be needed.*
- 25 systems support **local processes**, such as security issues or threats at the local office, scheduling client appointments, tracking clients that visit the local office, employee databases, physical file locations, and monitoring work productivity/quality assurance.
 - *These systems need to be evaluated; based on the information provided, most are local systems that would not require an interface with CONNECTIONS.*

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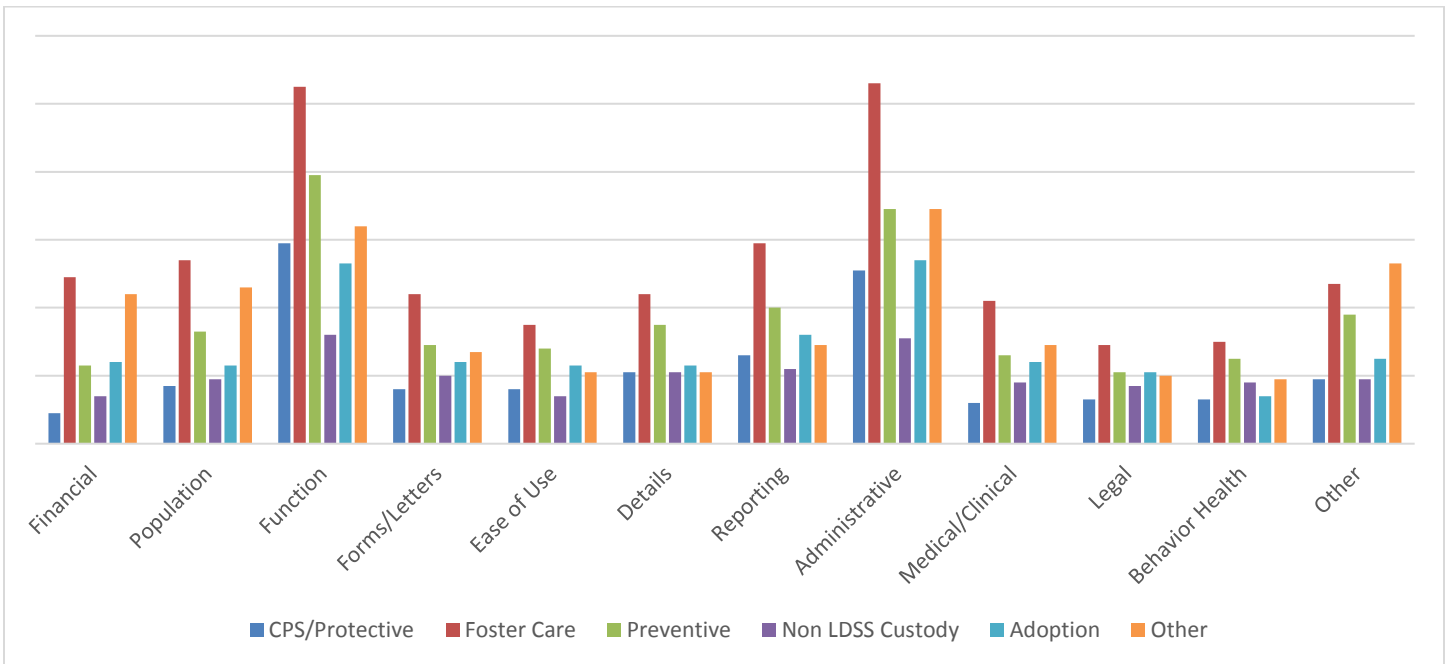
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- There are 1 to 5 different systems for each of the following purposes: fraudulent case tracking; letter/form generation; legal documents/systems; fair hearings systems; child assessments, testing, and IEP programming; homeless tracking; court document tracking; employment status tracking; liens, assets, and other individual asset for public assistance clients; incident tracking; HEAP benefit tracking; and other discrete, specific custom-developed tools and instruments.
 - *These systems need to be evaluated on an individual basis to determine if they comprise CCWIS data and should be part of or interface with CONNECTIONS.*
- Of the districts and agencies that have only 1 system outside of CONNECTIONS:
 - The 11 district systems are for local case tracking, financial functions, or document imaging
 - The 29 VA systems are mostly for local case tracking, financial functions, and electronic health records.

See below for a graphical depiction of the survey responses by services supported and major functions or problems addressed. Each system could be coded with as many services and functions as applied.



		Services/Functions Aggregate						
		CPS/Protective	Foster Care	Preventive	Non LDSS Custody	Adoption	Other	Grand Total
Financial		9	49	23	14	24	44	163
Population		17	54	33	19	23	46	192
Function		59	105	79	32	53	64	392
Forms/Letters		16	44	29	20	24	27	160
Ease of Use		16	35	28	14	23	21	137
Details		21	44	35	21	23	21	165
Reporting		26	59	40	22	32	29	208
Administrative		51	106	69	31	54	69	380
Medical/Clinical		12	42	26	18	24	29	151
Legal		13	29	21	17	21	20	121
Behavior Health		13	30	25	18	14	19	119
Other		19	47	38	19	25	53	201



In addition to services and functions supported, the following information was collected:

To your knowledge, is some of the information collected in this system also entered into CONNECTIONS?

	LDSS	VA	Overall
Yes, duplicate data entry is required	27%	70%	42%
Yes, but we use the ODS (Operational Data Store) to automatically feed our local system	24%	3%	17%
Yes, but we extract data from the OCFS DW (other than the ODS) and download it into our local system	1%	1%	1%
No, none of this data is captured in CONNECTIONS	47%	26%	40%

If you said that duplicate data entry is required above, what do you do when there is a data mismatch/conflict?

	LDSS	VA	Overall
We trust our local system and do not have time or resources to correct data conflicts	7%	7%	6%
We use the CONNECTIONS information to manually update our local system	13%	25%	15%
We use our local system information to manually update CONNECTIONS	4%	20%	8%
Other	6%	48%	17%
N/A (no duplicate data entry)	69%	33%	54%

How easy is it to get technical support for this local system?

	LDSS	VA	Overall
Simple and immediate, on-site support	62%	26%	49%
Simple, just a phone call away	21%	56%	33%
It takes a while to get someone's attention	4%	13%	8%
Difficult and aggravating	1%	2%	1%
There is no technical support	12%	3%	9%

Do you have the capability to extract data files from this system in-house, or do you need permission or assistance from an outside vendor?

	LDSS	VA	Overall
Can extract data in-house	87%	84%	86%
Need vendor to extract data	8%	4%	6%
Don't know	5%	12%	8%

Overall, 10% of districts and agencies believe OCFS should visit them to review their system on-site due to the system complexity or how much they have to show us; 90% said a webex/teleconference would suffice.

When asked if they would like to participate in a focus group on CCWIS design and gap analysis:

- 17 counties (out of 52 responding) said Yes
- 38 voluntary agencies (out of 83 responding) said Yes

Next Steps

- 1) **March 2019 - Internal OCFS/ITS discussions:** Discussions with subject matter experts/data owners/system experts are needed to review the largest “buckets” of local systems reported to be in use: local case tracking; reporting; financial functions; document imaging; and medical/clinical information. Document suggested category and prioritization. Discussions should center around the questions:
 - a. What functionality should be added to CONNECTIONS (and potentially negate the need for local system)?
 - b. What systems should stay separate from CONNECTIONS and would clearly benefit from a data exchange?
- 2) **March/April 2019 - Develop 6-Year CCWIS Road Map** to use as a communication tool that estimates when new functionality and data exchanges might be able to be accomplished/deployed. Use tentative CONNECTIONS build schedule as a starting point for timeframes.
- 3) **April 2019 - Begin monthly Webex/webinars** with OCFS, ITS, and LDSS and VA representatives to share CCWIS information and solicit input/feedback. Potential topics might include:
 - a. CCWIS overview, including #2 above (Road Map), and Local System Survey results review (this report)
 - b. LDSS use of OnBase and other Northwoods systems
 - c. VA use of MyEvolv/Netmart
 - d. Solicit feedback on output from #1 above (OCFS/ITS thoughts on functionality vs data exchanges); prioritize
 - e. What “work-arounds” are in place? Where specifically does CONNECTIONS not allow you to do what you need to do, and what are you doing to get around it?
 - f. What should be included on a CONNECTIONS Dashboard (home page)? I.e., list of children in placement (and where); list of cases missing AFCARS data
 - g. What reports would be useful to have available within CONNECTIONS; what would help workers and supervisors?
 - h. Data quality; messaging, buy-in, importance, automation
 - i. Mobile application – Progress Notes; what else? Use of tablets
 - j. Data interfaces: OCFS systems, other state systems, LDSS systems, VA systems
 - k. Predictive analytics
- 4) **Monthly/Started Feb 2019 - CCWIS/COFCCA Data Quality Workgroup:** Workgroup includes five members of COFCCA voluntary agencies, OCFS, ITS, and NYS ACS. Monthly meetings began early February 2019, which began with a process walk-through of areas of duplicate data entry related to foster care movements and billing information. Future meetings will address other broad areas of duplicate entry, followed by a prioritization and then deeper analysis into specific processes where data exchanges may help. The group may eventually expand to other counties and agencies.
- 5) **Biweekly – NYC Administration for Children’s Services** and OCFS are meeting; current work is reviewing ACS’ 40+ local systems. ACS is identifying which might be useful statewide and should be considered for future CONNECTIONS functionality, and which should be considered for data exchange.
- 6) **Ongoing – Refine 6-Year CCWIS Road Map** and continue to use as a communication tool along with CONNECTIONS tentative build schedule.

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- 7) **Ongoing – Functional Requirements and Data Exchange** work. Requirements will be needed for any new functionality to build into CONNECTIONS. A Data Exchange Standard is being determined; work will need to be done for each interface (with LDSS, VA, and/or vendor) to do analysis, mapping, data transfer, data profiling, data quality edits, and data storage and presentation. This work will be part of the CCWIS Road Map.

For more information:

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