

## Minnesota Omaha System Users Group Minutes

February 1, 2012

**Meeting Facilitators:** Deborah Greenleaf, Public Health – Seattle & King County and Suzanne Plemmons, Kitsap Public Health District, Washington State

**Meeting Participants:** Alix Hopkins, Cathy Gagne, Carol Meissner, Christine Bursaw, David Rosebaugh, Jaimi, Donna Borgford Parnell, Jean Roberts, Jill Timm, Jean Roberts Kearn, Karen Munson, Madeline Kerr, Kay Iagred, Laura, LeAnn, Carla Prock, Christine Bursaw, Elizabeth Custis, Linda Bullock, Michelle Conley, Molly Snuggerud, City Bloomin, Otter Tail-Diane, Kristin, Pat Anderson, Lois Schipper, Rosemary Chaudry, Teresa Vollan, and Mary Jo Baisch

### **Using the Omaha System in Washington State**

#### **Beth Lipton, Epidemiologist, Kitsap Public Health District: *Maternal Child Health Outcomes from Public Health Nurse Visits***

Kitsap has been collecting Omaha System data through Nightingale Notes for the past three years for their PHN visits with pregnant and postpartum women. They export their system data into excel sheets and then do a statistical analysis using the SSPS system. They developed a timeline to define and identify which clients should be included those who completed their course of services into their data set. They gathered information on 406 clients and did a summary of their demographics. They found that less than 33% were married, 64% were unemployed, and 54% rented their dwellings. They found Hispanic women 52% has less than high school education compared to 26% of non-Hispanic clients. They found on average clients received 3.5 visits. Only 50% of their clients were seen during their pregnancy and postpartum. Their highest of risk patients are seen more often with and average of 5.3 visits compared to 1.9 visits for low risk patients. On average, clients had 2.5 Omaha Problems. Income was the most selected problem at 92% followed by mental health 37% and substance abuse 33%. They did a statistical analysis of KBS rating for clients with 2 or more visits. They found the average changes in ratings for all Omaha problems combined had statistically significant increases across all KBS ratings areas. For individual Omaha problems, they found statistically increased ratings in Mental Health for all KBS ratings, Postpartum had for status, and Substance Abuse had for knowledge. They also learned that it is a reliable system to extract data, and it helps to better describe client population as well as find opportunities for quality improvement.

*How did these outcomes compare to Minnesota outcomes? They are pretty comparable that have come from Washington County MN and other MN counties. It showed the same kinds of trends. This helps to support best practices across the country.*

**Rebecca Benson and Deborah Greenleaf, Public Health Seattle-King County: *Early Intervention Program and Early Family Support Services: Analyzing Program Outcomes with the Omaha System of Documentation***

This project was conducted to better understand program outcomes for PHN services to children experiencing child maltreatment (abuse and/or neglect). In Washington State, a workgroup was formed in which they selected Omaha System Problems to use, and developed a KBS supplemental rating manual and care pathways to be consistent with state statutes on local child welfare practices. A system of documentation was developed through excel billing logs and a training program was developed and implemented for staff. Data was collected for a 16 month period. Those families that had recorded initial and closing KBS ratings were included into the study sample 213 Omaha problems were identified that were generated from 123 families. The most frequently selected Omaha problems were Caretaking and Parenting (37%), Child and Growth and Development (17%), and Residence (10%). The changes in KBS ratings for each problem were averaged and analyzed. For most Omaha System problems there was a positive change of 0.5 or greater for each KBS rating area. It was quite surprising to find that there were changes made in status which was not anticipated. It really helped to reinforce to the nurses that they were making changes with the difficult circumstances these families encountered. It was also surprising to see that the most significant changes across all KBS ratings were for Mental Health and Substance Abuse.

*Are other EIP and EFSS programs in Washington State collecting this data? Yes they have been collecting the data but we have not yet had a chance to compare the data sets across the state as some of the providers are collecting the data on paper tools.*

*How long does a nurse follow a client? It depends on the program/contract requirements. They may be open for a few visits and some are followed over a year.*

**Madeleine Kerr: Using the Omaha System for Windshield Survey Data Collection**

The purpose is to develop an Omaha System tool for a Windshield Survey for community level work. They have developed a survey monkey tool for 10 items. Please have your students use the monkey survey tool in the U.S. and with our national partners. The goals of this tool are to: Develop a tool that students can use for community assessment, to see if the Omaha System can be used for community assessment, and describe what we are seeing in communities.

*The first wave of data collection will cease May 31, 2012. It was requested to have a data collection period to also capture students taking summer classes.*

**St. Paul-Ramsey County Public Health/Karen Monsen: KBS Inter-rater reliability Exercise**

Karen presented revised KBS scenarios from 12-1-11 meeting. These scenarios were rated from 52 people. We hope to have 85% agreement on our KBS rating.

The first scenario was for a family planning and goal was for a KBS 2-1-1 rating and that is what it was rated. It was discussed if there was anything else to strengthen the knowledge area. It was suggested to give more information on what the client herself knows something about specific contraceptive methods like pills or shots, and take out the information about the sister in law. You could also discuss her awareness of needing to space pregnancies. For status it would be good to say something about what she wants for further pregnancies like "I'm not ready for another baby."

Scenario two was another family planning scenario and it was KBS rated as average 3-2/3-3 ratings. The goal is to get it to as a 4-2-2 rating. It was discussed that this scenario is difficult to rate as the KBS rating manual does not. It was suggested to beef up the knowledge and decrease behavior and status.

Scenario three was on income. No changes were suggested

In future will put in a comments section on why they chose a rating. Karen plans to take these scenarios to Karen Martin to get her agreement before posting them. Karen suggested it is time for us to update our KBS rating manual in 2012. Please let Karen know if you want to participate.

#### St. Louis: **Community Care Team Update**

This agenda item was deferred.

#### **Using the Omaha System Internationally**

Kay Paulsen from New Zealand was not available to participate. Karen did attend the meeting and people participated from all over New Zealand and it was their first Omaha Systems user group. They are discussing preliminary data on their home care programs.

#### **Participant updates**

Karen Martin has announced workshops in Pennsylvania in March.

The obesity management website is up for use

Kern County has just implemented Insight System

Mary Jo finishing taxonomy mapping the wheel to the Omaha System

Springfield MO has just implemented Insight System and has found that the inter-rater-reliability rating exercises have been helpful. Contact Nancy Springfield at

[nhoeman@springfieldmo.gov](mailto:nhoeman@springfieldmo.gov) for more information about using Insight.

#### **Wrap-up and agenda items for next meeting**

Caretaking and Parenting KBS Inter-Rater-Reliability Exercises and working on KBS rating guide

Social Determinants of Health Project in Minnesota

The Early Hearing Detection Group Update

Disease Prevention and Control project update

The steering committee will meet in March and you can give agenda ideas on the MN users Omaha System's Website page