

Utah

Project title: Child Health Advanced Records Management (CHARM)

Organization responsible: Utah Department of Health

Service coverage area: State of Utah

Annual birth cohort: 51,000

Project scope and goals

CHARM is integrating the state's Birth Registration System, Newborn Hearing Screening, Newborn Metabolic (heelstick) Screening, Child Immunizations, Baby Watch / Early Intervention, the Birth Defects Network, Children with Special Health Care Needs Specialty Clinics, Women Infants & Children (WIC), Medicaid, Child Health Evaluation and Care (Utah version of Early Periodic Screening and Diagnosis and Treatment, or EPSDT), Child Health Insurance Program, Lead Screening, and DHS/DCFS SAFE – Health Services for Children in Foster Care.

CHARM will use secure, integration infrastructure middleware to link the operational systems within the participating programs and provide information to a centralized Child Health Profile database containing shared data elements (master patient index). The CHARM architecture is able to integrate autonomous and heterogeneous health care programs so they can share data with minimal impact on existing software.

Funding

- EHD Cooperative Agreement (CDC)
- GSDI Grant (HRSA)
- Connections TA (AKC/PHI and RWJF)
- SSDI Grant (HRSA)
- MCH Block Grant (HRSA)

History

Several years ago, a now infamous photograph was circulated in meetings of state and local health officials. The picture showed four computers crowded onto a single desk in a rural health clinic. Because the systems were not integrated, local health departments had to use all four computers separately – and often redundantly – to enter client information into the various state programs.

In 1997, the Utah Department of Health (UDOH) adopted an Information Systems Vision. It called for data to be entered only once, to be complete, uniform, and accurate, to be readily available to authorized users, and to meet the users' needs of availability and usefulness. In early 1999, UDOH's executive leadership made an investment in, and a long-term commitment to, systems

integration. In the fall of 1999, a new integrative strategy was formulated during two joint program-IT retreats. This strategy is currently being pursued, and CHARM is one of the five strategic initiatives adopted at that time. Perceived benefits of having different programs working together include enhanced client satisfaction, improved client services, improved multi-problem response, reduced cost, improved assessment, outcome measurement, information for private providers, and improved monitoring of program coverage.

Executive leadership and organizational endorsements

Data system integration has been a Level 4 issue in the Utah Department of Health – ranking among fewer than a dozen issues given the highest priority in the department and was closely monitored by the former executive director. With the election of a new governor (Nov. 2004) and the appointment of a new UDOH executive director (Jan. 2005), there is continued expectation of high-level support for data integration projects, including CHARM.

The CHARM Core Council, comprising the managers of the programs targeted for integration continues to oversee and advise the CHARM Project. This council is chaired by Dr. George Delavan, Director of the Division of Community and Family Health Services, co-chaired by Barry Nangle, Director of Vital Records, and takes on such issues as prioritization of program integration, content of shared data, access and use of data, and others.

External endorsements

Representatives of the IHC, the largest provider of health care in Utah, support the ideas and directions of CHARM. The birth-record-number-dissemination project was well received in the pilot hospitals. The Utah Medical Home Project, Utah's Chapter of Family Voices, and the Utah Leadership Education in Neurodevelopmental Disabilities Program also provide strong support.

Significant challenges

- 1) Funding continues to be the most significant challenge.
- 2) Striking the right balance between safeguarding confidential information and allowing access across traditional program and agency boundaries.
- 3) Building the right partnerships to support the CHARM initiative, short term and long term.

Contact

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