



"Having spent most of my career in Massachusetts, I often wished for this type of database. Now that I have it, it would be very hard to work in a state that did not have this invaluable tool. As a pediatric audiologist, I encourage colleagues to use this system of improving service delivery to the children of Rhode Island." - [Mary Ellen Curran, Au.D., CCC-A, Director of Audiology Women and Infants' Hospital of Rhode Island](#)

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## KIDSNET WELCOMES

Direct Doctors, Lauren Hedde DO



## TIP OF THE DAY

The Rhode Island School Physical Form is a timesaving pre filled form available in KIDSNET. Information such as provider name and address, student name, date of birth, gender, and immunizations are populated from KIDSNET data.

The form is also text rich which allows providers to add physical examination information such as lead screening compliance, scoliosis screening, vision, and more.

A blank form is also available through the KIDSNET [Forms and Resources](#) link. This form may substitute for any district-issued form and all districts must accept this form.

## NEW SCHOOL IMMUNIZATIONS REGULATIONS FOR THE 2015-2016 SCHOOL YEAR

HEALTH has updated its immunization regulations for preschools, schools, colleges, and universities. These updates will take effect at the beginning of the 2015-2016 school year, so for the upcoming 2014-2015 school year schools should continue to follow the current regulations from 2009.

## CHILD OUTREACH SCREENING IS COMING TO KIDSNET

Early identification of developmental concerns and swift intervention prior to starting elementary school is important to promote educational success. The Rhode Island Regulations Governing the Education of Children with Disabilities requires that local school departments screen all 3, 4, and 5 year olds living in their school district prior to kindergarten entry. Children are screened for vision and hearing loss, speech and language development, social-emotional and general development. Each school district locates and screens children, rescreens as necessary, makes referrals to special education, sends reports to families, and with parent/guardian's consent, this information is communicated to primary care providers, and early care and education programs. Data are collected and analyzed locally, but up until now there has not been a statewide data system.

### FALL 2014

#### A new Child Outreach Screening Module will be live!

There are several advantages to coordinating the child outreach data statewide. Currently, local school districts rely on early care and education programs, advertisements in local media, and brochures to identify and contact families of children needing screens. Through the new system, every child in KIDSNET with a valid address will be assigned to a school district. This will help districts identify and contact all children, especially at-risk and hard to locate children. Additionally, screening results will be able to be shared between districts (for example, between an early care and education program and a district in another community). Finally, with parent permission, results will also be available to primary care providers and others involved in coordinating healthcare via KIDSNET.

These advantages are intended to support and strengthen an already strong [Child Outreach Screening Program](#) and to make sure that all of Rhode Island's 3-5 year olds can benefit from this program.



## PROVIDER IMMUNIZATION CONFERENCE AND DINNER TO FOCUS ON HPV

There is still time to register for the **Provider Immunization Conference** scheduled for **Tuesday, September 16th, 2014**, 5:30 p.m. – 8:30 p.m. at the Crowne Plaza, Warwick. Rhode Island leads the nation in HPV vaccination, but is still far below the goals set by the Healthy People 2020 initiative. Learn about the latest research and strategies being implemented in Rhode Island and beyond to increase Human Papillomavirus (HPV) vaccination rates. Guest speakers will be on hand and healthcare provider immunization awards will be presented. CME credits for physicians will be available.

Please contact **Kathy Marceau** ([Kathy.Marceau@health.ri.gov](mailto:Kathy.Marceau@health.ri.gov)) for more information.

## RUNNING KIDSNET IMMUNIZATION PRACTICE REPORTS

Primary Care Providers (PCP) can identify children in KIDSNET who appear to be behind in vaccine. The report can identify all missing vaccines or individual vaccines. PCPs can put in specific dates of birth, or age in months and a report will be generated with the list of children requested from the practice's patient list in KIDSNET. When an age group is not selected, the report will list all children in the practice under 19 years of age who appear to be behind in vaccine based on the Rhode Island 2014 Recommended Childhood Immunization Schedule.

It is recommended that KIDSNET provider patient lists are reviewed periodically. Provider reports are generated from this list. Please run the patient list and highlight all patients who are no longer affiliated with your practice. Mail a copy to the KIDSNET program at the Rhode Island Department of Health. Postage paid stamped envelopes are available for your convenience.

## NASAL SPRAY FLU VACCINE RECOMMENDATION

The Advisory Committee on Immunization Practices (ACIP) now recommends the use of nasal spray flu vaccine instead of flu shots in healthy children 2-8 years of age when nasal spray flu vaccine is immediately available.

ACIP's recommendation states that if nasal spray flu vaccine is not immediately available, a flu shot should be administered. This new ACIP recommendation is based on a review of available studies that suggests the nasal spray flu vaccine can provide better protection than the flu shot in this age group against laboratory-confirmed, medically attended flu illness. For more information visit [www.cdc.gov/media/releases/2014/s0625-acip.html](http://www.cdc.gov/media/releases/2014/s0625-acip.html)



## STATE SUPPLIED INFLUENZA VACCINE

All practices enrolled in the State-Supplied Vaccine (SSV) program will be notified once influenza vaccine is available and ready to order through OSMOSSIS.

When reporting childhood influenza vaccine administered in the 2014-2015 influenza season to KIDSNET please use the following codes: **Quadrivalent FluMist (Nasal spray) : CVX 149 Manufacturer MED, Fluzone Quadrivalent PF 0.25ml 6-35 months: CVX 161 Manufacturer PMC, Fluzone Quadrivalent,PF 0.5ml : CVX 150 Manufacturer PMC.**

Updated KIDSNET data sheets are currently available reflecting the new flu codes. For more information contact Janet Limoges 222-7681 or Gail Miller 222-4644.

## UPDATED VISs FOR INFLUENZA (LAIV) AND INFLUENZA (TIV)

Two VISs for the 2014 - 2015 influenza season are now available. HL7 2.5.1 requires VIS information when an administered vaccine is sent to KIDSNET. Please make sure all required information is recorded in your electronic health record.

## CURRENT VACCINATION INFORMATION STATEMENTS (VISs)

Vaccine	VIS Date	Vaccine	VIS Date	Vaccine	VIS Date	Vaccine	VIS Date
Chickenpox	3/13/08	Hib	2/4/14	Meningococcal	10/14/11	PPSV	10/6/09
DTaP/DT/DTP	5/17/07	HPV	5/17/13	MMR MMRV	4/20/12 5/21/10	Polio	11/8/11
Hepatitis A	10/25/11	Influenza (LAIV) Influenza (TIV)	8/19/14 8/19/14	Multi-vaccine	on hold	Rotavirus	8/26/13
Hepatitis B	2/2/12			PCV13	2/27/13	Td Tdap	2/4/14 5/9/13

Please replace outdated VIS by ordering current versions:  
[www.health.ri.gov/order/publications](http://www.health.ri.gov/order/publications) click on Immunizations