



# KIDSNET UPDATE

RHODE ISLAND'S INTEGRATED CHILD HEALTH INFORMATION SYSTEM

MARCH / APRIL 2017

## IN THIS ISSUE:

- ▶ DATA TIDBIT
- ▶ REPORTING LEAD "FINGER STICK" SCREENING RESULTS
- ▶ STATE-SUPPLIED VACCINE ENROLLMENT
- ▶ STATE-SUPPLIED VACCINE WORKSHOP
- ▶ CDC CHILDHOOD IMMUNIZATION CHAMPION
- ▶ CHECK IN WITH YOUR EHR VENDOR
- ▶ SPRING CLEANING TIP – PATIENT LIST REPORT

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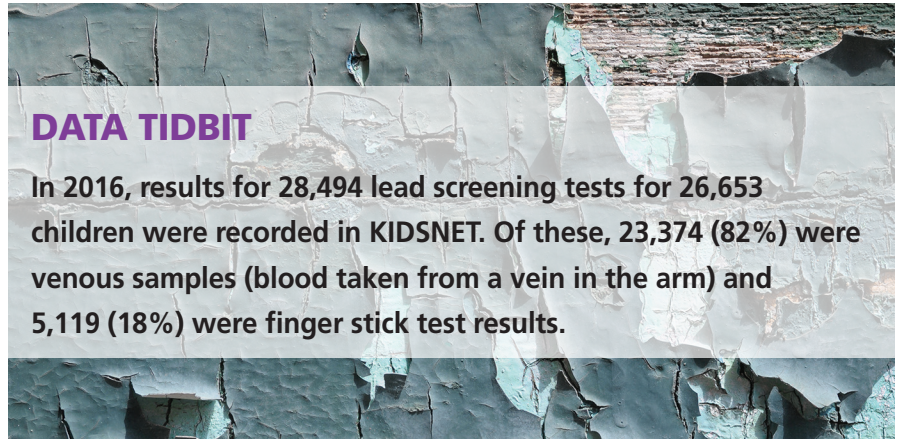
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## DATA TIDBIT

In 2016, results for 28,494 lead screening tests for 26,653 children were recorded in KIDSNET. Of these, 23,374 (82%) were venous samples (blood taken from a vein in the arm) and 5,119 (18%) were finger stick test results.

## REPORTING LEAD "FINGER STICK" SCREENING RESULTS

The Rhode Island Department of Health (RIDOH) has been working to eliminate Childhood Blood Lead Poisoning, as it is well known the debilitating effects lead poisoning has on childhood development. One of the most effective tools for eliminating poisoning is blood lead level screenings; specifically, screening children annually and taking corrective action promptly whenever a child has an elevated blood lead level of  $\geq 5 \mu\text{g}/\text{dl}$ . A child's physician plays a very important role in this process. It is critical for all physicians to screen their patients for lead poisoning through the age of six; in fact, Rhode Island providers are required by law to conduct two blood lead screening tests on all children by the time they are 36 months old, and to screen annually after age three if the child has two non-elevated blood lead levels. See the RI Lead Screening guidelines here:

<http://www.health.ri.gov/publications/brochures/provider/LeadScreeningAndReferralInterventionProcess.pdf>

These blood lead level test results are then available in KIDSNET, sent to RIDOH by the labs analyzing the blood. A physician can view KIDSNET to monitor their screening rates, identify children without the recommended scheduled screenings, and schedule screenings when necessary.

Recently, a new tool has become available called "Leadcare II", which allows doctors to take a finger stick blood sample and get the analyzed result immediately. Although this tool is convenient because it determines a child's lead level quickly, please remember that all physicians are required by law to send results for these "finger stick" tests to RIDOH so that we can effectively monitor blood lead poisoning prevalence and incidence in Rhode Island, as well as intervention effectiveness. For questions about submitting "finger stick" test results please contact **Anne Cardoza** at **401-222-7791**

## STATE-SUPPLIED VACCINE ENROLLMENT

Enrollment in the Rhode Island State-Supplied Vaccine (SSV) Program for 2017-2018 will open on June 1, 2017. Before enrollment/re-enrollment opens, please be sure to update this past year's flu doses administered reporting so that your practice's flu vaccine allotment for next year will accurately reflect usage.

If you have any questions about the flu doses administered reporting process or the upcoming enrollment, please contact the "Immunization Representative" listed in the header of your SSV Practice Menu screen. Only those enrolled for the 2017-2018 year will be able to order vaccine after July 1, 2017. Continue to check email messages and electronic newsletters from RIDOH to keep abreast of changes and updates concerning SSV.



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## STATE-SUPPLIED VACCINE WORKSHOP

**Save The Date** – the annual State-Supplied Vaccine Workshop will be held on Tuesday, May 16, 2017, at Amica in Lincoln, RI, from 8 am to 4 pm. There will be a morning and afternoon session that day. Attendance is strongly recommended for just one of the sessions. New vaccine ordering features in OSMOSSIS, vaccine and program policy updates, and presentations on coding and reimbursement will be reviewed. An invitation with more details will be sent out via email in late March.

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## CDC CHILDHOOD IMMUNIZATION CHAMPION



Meet Rhode Island's 2017 CDC Childhood Immunization Champion – **Siavash Ghoreishi, MD**, a pediatrician in East Greenwich. Dr. Ghoreishi believes that as a pediatrician, one of his major roles is to promote immunizations to reduce the incidence of vaccine-preventable diseases. He will often tell a vaccine-hesitant parent, "You wouldn't drive without putting your child in a car seat; why would you not vaccinate your child?" In addition to communicating effectively with vaccine-hesitant parents, Dr. Ghoreishi utilizes KIDSNET to ensure his patients are up-to date on their immunizations. Assessments of children 24 through 35 months of age, measured in March 2017, revealed over 90% of children completing the DTaP, Polio, MMR, Hib, HepB, Varicella, and PCV series by their second birthday. One hundred percent of these children also had flu vaccine in the previous season. For his efforts to work closely with all families to ensure each infant and child is vaccinated on time, Dr. Ghoreishi is recognized as Rhode Island's 2017 CDC Childhood Immunization Champion.

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## CHECK IN WITH YOUR EHR VENDOR

The majority of provider offices now submit immunization data using electronic data messaging from their electronic health record (EHR). A reminder that there are two issues that may require some changes by your EHR:

- 1) **Submit Histories** - All immunizations, whether historical or administered, must be transmitted to KIDSNET when they are first added to the electronic record. A number of the EHRs are currently not transmitting data for historical immunization encounters to KIDSNET. When a new patient joins your practice, you should send a paper copy of the patient history to KIDSNET if the record is not immediately entered into the EHR. Doing this will ensure that KIDSNET has complete immunization data for all patients at all times. Gaps in the patient's immunization record adversely affect a practice's coverage rates.
- 2) **Send HL7 2.5.1 messages** - KIDSNET plans to end support for HL7 2.3.1 Electronic Immunization Data Messaging effective March 31, 2018. All providers currently submitting data using the HL7 2.3.1 immunization messaging standard will be required to upgrade to HL7 2.5.1 prior to March 31, 2018. Failure to do so may result in an interruption to the ability to submit immunization data to electronically KIDSNET.

Please work with your vendor to ensure that immunization histories are submitted to KIDSNET when they are first added to your EHR, and that your practice is utilizing HL7 2.5.1 messages by the deadline. Electronic query/response to KIDSNET is currently being tested utilizing HL7 2.5.1. We hope to make this function available later in the calendar year.

Please contact Jeff Goggin at [Jeff.Goggin@health.ri.gov](mailto:Jeff.Goggin@health.ri.gov), or at 401-222-4968 with any questions and to receive your new authentication credentials for HL7 2.5.1. Current HL7 2.3.1 authentication credentials will not allow processing of HL7 2.5.1 messages.

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## SPRING CLEANING TIP – PATIENT LIST REPORT

Spring is a great time to perform a data clean-up in KIDSNET, and the best way to do this is to run a "Patient List Report". After running this report, highlight the patients that are no longer at your practice, and indicate if a patient has moved out of state or has changed their name. Then, mail the report into KIDSNET using the KIDSNET prepaid envelope. If you do not have any of the envelopes, please contact your KIDSNET Provider Relations Representative to obtain some. Cleaning up your Patient List will help increase the accuracy of any other reports that you run through KIDSNET.