Entering the Super Highway: The BCH Experience with the Electronic Immunization Record



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Boston Children's Hospital

Presentation Objectives:

- Explain the basic elements of the Massachusetts Immunization Information System (MIIS) and how the program impacts patients and communities throughout Massachusetts.
- Explain the role of the MIIS in meeting meaningful use requirements.
- Describe the steps involved in meeting the IT requirements for joining the MIIS.
- ✓ Describe how clinicians gain access to the MIIS and how its use is applied in a variety of settings.
- ✓ List the steps to on-board clinical and administrative staff in adopting the MIIS.



What is the Massachusetts Immunization Information System (MIIS)?

The MIIS is a secure, confidential, and easy to use system designed to support a complete set of immunization-related functions.

- ✓ Provides quick access to patient immunization records at point of care.
- ✓ Makes immunization histories for children new to your practice readily available.
- ✓ Validates patient vaccine history and forecasts due dates for future vaccinations.
- ✓ Identifies unimmunized and underimmunized children.
- ✓ Prevents duplicate immunization.

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- ✓ Enables to print forms for school and camp.
- Creates reminder and recall materials for your patients with due or overdue immunizations.

Source: Introducing the Massachusetts Immunization Information System MIIS Accessed from the MIIS Resource Center :www.contactMIIS.info Boston Children's Hospital

It is the law...

M.G.L. c. 111, s.24M legislation passed in June of 2010:

- Mandatory reporting of all immunizations administered in the state
- Access given to:
 - Schools
 - Healthcare professionals/hospitals
 - Local Boards of Health
 - WIC
 - Other state agencies who administer immunizations.
- As hospitals we are mandated to report all vaccine information to the state and we are also mandated to inform all patients and their families that we are part of the system.





Meaningful Use:

- Incentive program from the Federal Government encouraging providers to adopt and use EHR technology.
- In order to receive EHR-MU incentives, providers and facilities have to meet specific criteria, which has been divided into three stages over several years.
- Meeting immunization-specific requirements for Stage 1 establishes that providers must test and establish a connection between the EHR to the Immunization Information System in the provider's jurisdiction.



From: Meaningful Use Fact Sheet: Immunization Information Systems. Submission of electronic data to Immunization Registries of





Accessed from www.cdc.gove/EHRmeaningfuluse/Immunization.html

Immunization Information Systems

MIIS from the IT side:

- Background of our site and the history of immunizations documentation at Boston Children's Hospital
- Specific requirements for the MIIS and how they affected our work on this project
- ✓ The challenges presented by the different systems we use to enter immunizations
- ✓ Major issues we came across and how we approached them including additional considerations we looked into to solve these
- ✓ Ongoing items:
 - ✓ Support tasks
 - ✓ Troubleshooting
 - ✓ New build





Boston Children's Hospital Immunization Documentation

- Product live since 2006
- BCH home grown immunization documentation system was functional until beginning of March 2012
- On March 2012 we went LIVE with *new* Immunization Schedule
- Uploaded all immunization data from legacy system

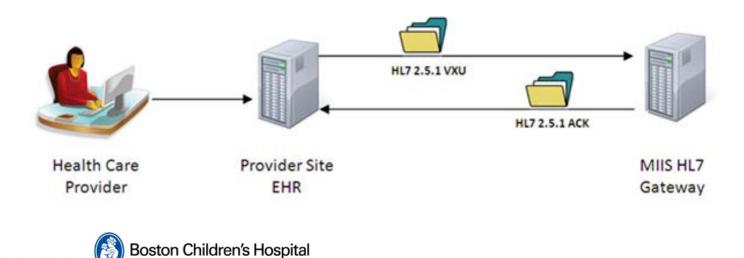




Defining the requirements for using MIIS

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- \checkmark Identify expectations of data process and how the exchange functions.
- Understanding how our users would be using the system and how it fit into their workflow.
- ✓ Outlined the elements for the historical data. This was not part of the real time interface.
- Setup 2 parallel projects to handle real time feed and the historical data flat file.



Challenges:

Trying to put square pegs into rounds holes!!

- Mapping various code set and data elements.
- ✓ Conducting vaccine mapping.
- Identifying facility a vaccine was administered.
- Mapping data from different sources or legacy systems.





Mapping/aliasing data elements and codes sets.

- Understanding the requirement.
- Know the rules for the data elements
- We used scripting to meet certain requirements.
- Mapping data which normally is an easy task took 5x longer to get it working with this exchange.

Examples for data element and code sets:

State

9.4 Race: PID-10 (HL7 Table 0005)

PID-10 is a <u>CE data type</u>; a triplet of values should be used, if av and description (PID-10.2) should be used.

VALUE (PID-10.1)	DESCRIPTION (PID-10.2)
1002-5	American Indian or Alaska Native
2028-9	Asian
2076-8	Native Hawaiian or Other Pacific Islander
2054-5	Black or African-American
2106-3	White
2131-1	Other Race
<empty field=""></empty>	Unknown/undetermined

Our code set -race:

Display	Display Key
Black	BLACK
White	WHITE
Asian or Pacific Islander	ASIANORPACIFICISLANDER
American Indian or Alaska Native	AMERICANINDIANORALASKANATIVE
Asian	ASIAN
Black or African American	BLACKORAFRICANAMERICAN
Declined to Answer	DECLINEDTOANSWER
Hispanic or Latino	HISPANICORLATINO
Other	OTHER
Unable to Answer	UNABLETOANSWER
Native Hawaiian or Other Pacific Isl	NATIVEHAWAIIANOROTHERPACIFIC
Question Not Asked	QUESTIONNOTASKED
Unknown	UNKNOWN
Biracial	BIRACIAL
HALALISE & ALLER	LUUINADI ETOANOVED





Vaccine Mapping: Our build vs. MIIS expectations

- This was the most challenging piece of the project and consumed a very large piece of project time.
- The state wanted more than an "HPV" or "Influenza vaccine" documentation when administered. They wanted to have more specific information about that vaccine, which we did not have. We had significant challenges defining this piece.
- We setup a work group to help with these problems. The group consisted of myself, pharmacy, IT rep (who was also a pharmacist), pharmacy manager, MIIS consultant and MIIS Pharmacy contact.
- Example of vaccine mapping document next slide.





Immunizations in CHB	Codo From MUS Shoot	Vaccine name in MIIS sheet	E
1 Immunizations in CHB	Code From Mills Sheet	vaccine name in Mills sneet	
17 Fluzone PF SYR 0.25 mL	140	Flu-TI∨ 6-35 mos - preservative free	
18 Fluzone vaccine	141	Flu-TlV ≻= 3 yrs	
19 haemophilus b conjugate (HbOC) vaccine	47	Hib-HbOC	
20 haemophilus b conjugate (PRP-OMP) vaccin	49	Hib-OMP	
21 haemophilus b conjugate (PRP-T) vaccine	48	Hib-PRP-T	
22 haemophilus b conjugate vaccine	17	Hib-unspecified formulation	
23 haemophilus b-hepatitis B vaccine	51	HepB-Hib	
24 hepatitis A adult vaccine	52	HepA-Adult	
25 hepatitis A pediatric vaccine	83	HepA-Peds 2 Dose	
26 hepatitis A vaccine	85	HepA, unspecified formulation	
27 hepatitis A-hepatitis B vaccine	104	HepA-HepB Adult	
28 hepatitis B adult vaccine	43	HepB Adult	
29 hepatitis B immune globulin	not in MIIS		
30 hepatitis B pediatric vaccine	8	HepB-Peds	
31 hepatitis B vaccine	45	HepB, unspecified formulation	
32 human papillomavirus vaccine	62	HPV, quadrivalent	
33 human papillomavirus vaccine (PF)	not in MIIS		
34 influenza A H1N1 vaccine, inactivated	127	Flu-H1N1 >=3 yrs AND Flu-H1N1 6-35 mos	
35 influenza A H1N1 vaccine, live	125	Flu-H1N1-LAI∨	
36 influenza vaccine md	cannot determine		
37 influenza virus vaccine	cannot determine		
38 influenza virus vaccine H1N1 inactivated	127	Flu-H1N1 ≻=3 yrs AND Flu-H1N1 6-35 mos	
39 influenza virus vaccine, H1N1, live	125	Flu-H1N1-LAIV	
40 influenza virus vaccine, inactivated	141 AND 140	u-TIV ≻= 3 yrs AND Flu-TIV 6-35 mos - preservative-fre	e
41 influenza virus vaccine, live, trivalent	111	Flu-LAIV	
42 Japanese encephalitis vaccine SA14-14-2	39	Japanese encephalitis - SC	
43 Japanese encephalitis virus vaccine	39	Japanese encephalitis - SC	
44 Japanese encephalitis, unspecified	129	Japanese encephalitis, unspecified formulation	
45 measle/mump/rubella/varicella vir vaccin	94	MMR∨	
46 measles virus vaccine	not in MIIS		

Example of an early attempt at us matching our vaccines to MIIS.

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Historical Flat File: Immunization Data from different sources

- Data from our old system was not entered with the requirements and standards.
- Data was missing elements (lot number, administration site).
- Formatting in fields was being used for other reasons.
- We set up a grid to track the different scenarios and worked with our MIIS contact and went through the different options for each scenario.
- We scripted in data to fill out the missing requirements.
- What worked well:
 - Pulled examples of the different data types.
 - Ran batch tests to ensure data processes.
 - Creating a grid and workgroup to help outline solutions
 - Got to know the data

PIN assignments from **MIIS**:

- It is important to identify the facility where the patient was see.
- We have patients that are seen at Boston Children's main campus, Dana Faber Cancer Institute and Martha Eliot Health Center.
- State requires a PIN (unique identifier) for each facility where a patient gets their immunization. This PIN needs to be part of the immunization message to MIIS.
- We created a tag for the different encounters to determine where the patient was treated. Based on that tag we would attach the PIN to the interface message.





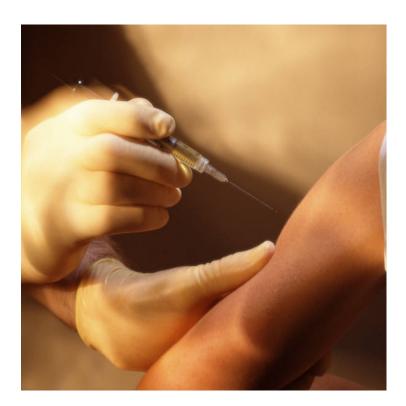
We're 'live' but the work doesn't stop!



- Downtime planning for your site and state registry.
- Error reporting: Who gets notified of errors?
- Managing changes to the registry
 - How does the registry notify your site of changes?
 - How do you get notified of downtimes to the registry?
 - What are the expectations for vaccine changes?
 - What is the expected turnaround time to implement changes?



What are the logistical pieces for the clinical side?





First things first...

- We *must* report to families:
 - We are part of the MIIS.
 - By law we have to report
 ALL vaccines to the state, regardless of where the patient lives.
 - Families have the right to object sharing information with providers outside of BCH and the MIIS.





We need information sheets and posters in all languages



Massachusetts Immunization Information System

IMMUNIZATION REGISTRY NOTICE

You or your child's shot information is being entered into the Massachusetts Immunization Information System (MIIS), as required by law. The MIIS is a confidential, statewide immunization tracking system. You can choose to restrict who may see your or your child's shot information in the MIIS at any time. Please ask your healthcare provider for further information. Thank you.

Provides are required by law to report your immulizations to the Mills (M.G.L. et 11, Section 24M). For more information, please ask your healthcase provider, visit the MIS website at www.mass.gov/dphmiis, or contact the Massachusetts immunization Program directly at 617-083-680 or 888-653-2850. Sistema de Información sobre Vacunación de Masachusests AUSO SOBIEL ISE ESEGNIDO EVICANCIÓN La Información sobre las decasas la de sus histo esta avecadas, la y roma contempaís las gen a las decasas la de sus histos esta avecadas, las y roma contempaís las gen a una las decasas estas de invenzacion de Masachurets IMRI, por ao signa en inplás). Milis sun aistema enfeñencial que hava una sequiniento de las handres de invenzios en inde instatu. Esta de manta sobre de Masachurets DRRI, en cualquer momento. Censulto con su provedor de aludí si deses más información al megato. Caraísa:

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Sistema de Informação de Vacinação de Massachusetts

AVISO DE INSCIEÇÃO PARA VACINAÇÃO De acredocemo exoligido por fei, tartes aux informação de vacenda que regará a vacinas, teta a um regratada no statema de informação de Vacenação conferência a e aveinas estas estas estas estas estas estas estas estas estas conferência a exolución estas de la de la de portes estas estas estas estas conferência a exolución estas estas estas por limitar, em queba esta estas estas

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個件者做這種更相思的失發接種原告給(MIS MGL c. 111 第24M股)。 如果更多資訊,關注對定的 保護證例者: 翻訳 MIS:常知 www.mass.gov/dph/mils, 是目前者 617-563-68008886-685-2850 重貨物給券者先投援重訂書:

Introducing the

Massachusetts Immunization Information System

MIIS

Fact Sheet for Parents and Patients



The MIIS is a new statewide system to keep track of immunization records for you and your family. These records list the vaccinations (shots) you and your children get to protect against measles, chickenpox, tetarus, and other diseases. The goal is to make sure that everyone in Massachusetts is up-to-date with their shots and that your records are available when you need them – such as when your child enters school, when you need emergency medical help, or when you charge healthcare providers.

What is the MIIS?

MINEMED 2011

 A computerized system that collects and stores basic immunization information for people who live in Massachusetts kin, as required by Massachusetts kin, A system that is available for people of all ages, not just children.

How will it help me? The MIS: • Helps you and your family get the

- mays you and your ramely get the best care wherever you go for your healthcare.
 Makes sure that you and your
- children don't miss any shots or get too many.
 Can print a record for you or your children when you need it if you move, if your doctor retres, or when your child starts school or camp.



- shots needed to keep healthy can be very complicated. The MIS: • Helps your healthcare provider
 - keep track of which shots are due and when they should be given.
 Keeps all your immunization
 - records together for you, your family, and your healthcare provider.
 - Provides proof of vaccination for your children.
 - Helps prevent outbreaks of disease like measles and the flu
 - Keeps shot records safe during natural disasters such as
 - natural disasters such as flooding or humcanes.

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The Objection Form

Massachusetts	Immu	nizatio	n Inform	ation System
	M	İİ	IS	

SHARING YOUR IMMUNIZATION INFORMATION Objection (or Withdrawal of Objection) Form

Name of Patient:

□ I OBJECT to the sharing of information in the MIIS about me or my child. I understand that this will keep my or my child's doctor or other health care provider from being able to check the MIIS for immunization information that comes from other health providers. I further understand that this objection will not prevent my child or me from receiving immunizations.

□ I WITHDRAW MY PREVIOUS OBJECTION to the sharing of immunization information in the MIIS about me or my child. I understand that by signing and submitting this form, the MIIS will be able to share immunization information with my or my child's doctor(s) or other health care providers and other persons allowed by law to view this information.

Patient's Information (this information is necessary to properly identify the patient):

Name:		Date of Birth://
Last	First	
Mother's Maiden Name:		Gender:

	For child younger rrs of age	Phone#:
Address:		<u> </u>
City:	State:	Zip Code:
		_

Parent/Guardian Information (required if form is completed for a child younger than 18 years of age):

Name:		Date of Birth: /
Name.		
Last	Firs	
		ADDRESS & PHONE #
Relationship to Patient:		ARE SAME AS
		PATIENT'S
Address:		Phone#:
City:	State:	
		Zip Code:
	_	

Signature of Patient, or Parent/Guardian (if child is younger than 18 years of age): Signature:

Health Care Provider Use Only – please enter your contact information, mail or fax a copy of the form to MDPH, and keep the original for the patient's record:

 \Rightarrow

- 1. Fill out the form and obtain parental/guardian signature.
- 2. Fax to the state and get confirmation sheet.
- 3. Barcode label and scan into patient's chart with confirmation sheet.

Date





E-Library Management



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On-Boarding of Staff

- Announcements through all councils for medical and nursing staff.
 - Informatics
 - Nursing Education Council
 - Nursing Informatics Council
 - Prescriber Training
 - Executive Leadership
 - Nursing Leadership
- Announcements for the Practice Administrators for all settings.
- Frequent e-mail communication.





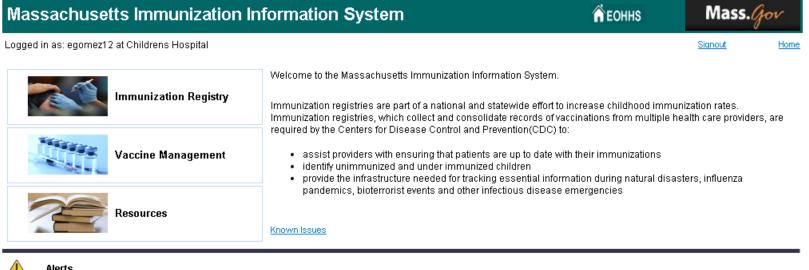


Critical pieces for education of staff:

- Send e-mails notifying the staff we will implement soon and attend staff meetings to demonstrate.
- After e-mails and meetings, it is of the essence to meet the staff in person and help them go through the enrollment process.
- Follow-up with visits to ensure that after they register they can log-in to the MIIS to enter the system and search patients correctly.
- Be present to troubleshoot problems and contact the state with issues.
- Practice makes perfect.



Clinician Access to the MIIS



Alerts

Reminder/Recall Report: As part of the system upgrade, the MIIS is running a comprehensive patient and immunization deduplication process. During this time, Reminder/Recall Reports may not reflect the most accurate forecast data for patients that were migrated from the previous system. MDPH recommends that MIIS Users refrain from running Reminder/Recall Reports until the process is complete. At that time, we will send an email notification to users and remove this Alert.

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The MIIS requires a PDF reader which can be downloaded here.

Help Desk

- Staff can enter the system to look up patient information and generate reports of vaccine history.
- We do not use it to enter any data at this point, only to look it up.
- We do not use it to order vaccinations.

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Going live Issues: Before and After

- Multiple data checks over a period of time to ensure data was transmitting correctly.
- We survived one upgrade before going live.
- One common issue was finding the e-mail address in the street address bar.
- Multiple vaccines combo shots were not transmitting correctly. We are still troubleshooting that problem.
- Staff needed reinforcement on how to complete and submit the objection form to the state and save in our records.

Recommendations for your implementation:

- Have your IT team communicate frequently with clinical team to ensure everyone knows the same information at the same time.
- Establish leadership roles for both teams and their implementation plans. Team leaders should also communicate regularly.
- Clinical implementation team leader should communicate weekly with the state officials and reps to ensure meeting the deadlines and troubleshoot issues.
- Communicate in every forum, become an ambassador of your project by making yourself available to everyone involved.
- The project does not end at "go live", it continues until it becomes second nature to the system.



Any Questions?



