



KIDSNET: Rhode Island's Integrated Child Health Information System

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What is KIDSNET?



- ✿✿✿ A Public Health Program – not an electronic medical record
- ✿✿✿ Integrated Child Health Information System
- ✿✿✿ Facilitates the collection and appropriate sharing of health data by authorized users for the provision of timely and appropriate preventive health services and follow up

Historical Overview



- 👤👤👤 National measles outbreak (1989-1991)
- 👤👤👤 Push for Immunization registry development
- 👤👤👤 RI already had high immunization rates
- 👤👤👤 Many categorical programs wanted to develop information systems
- 👤👤👤 Families and health care providers did not like getting information on the same child from multiple programs
- 👤👤👤 Limited resources could be pooled

KIDSNET Partner Programs



6 Universal:

- *** Newborn Developmental Risk
- *** Newborn Bloodspot Screening
- *** Newborn Hearing Assessment
- *** Immunization
- *** Childhood Lead Poisoning
- *** Vital Records

5 Targeted:

- *** WIC
- *** Early Intervention
- *** First Connections (Home Visiting)
- *** Birth Defects*
- *** Foster Care*

* No Web access

KIDSNET Data Sources



*** Public Health Databases

- *** Electronic Files – existing databases

- *** Data Entry – no separate database

*** Medical Providers (Immunization & Audiology)

- *** Electronic files (Billing and EMR)

 - *** HL7 & flat files

- *** Paper submission for data entry

- *** On-line data entry

System Users



- ☆☆ Medical Care Providers
- ☆☆ Maternal & Child Health Programs
- ☆☆ Head Start Agencies and Daycare
- ☆☆ School Nurses
- ☆☆ First Connections Home Visitors
- ☆☆ Certified Lead Centers
- ☆☆ Audiologists
- ☆☆ Managed Care Organizations



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Demographics

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[Level 1 Screening](#)

Demographics

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Enter KIDSNET ID:

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Demographic Information - 01/30/2008 -

Child Id: **16271** Medical Record: Date Updated: **04/04**
Patient: **JEAN M AMORE** Age: **9y 11m**
Race: **WHITE** Ethnicity: **UNKNOWN**
DOB: (hh:mm) **02/20/1998 -01:23 PM** Gender: **FEMALE**
Mother's Maiden Name:
Hospital: **WOMEN & INFANTS** Status: **ACTIVE**
State of Birth: **RI** Medicaid Id:
Insurance: **UNITEDHEALTH CARE**
Primary Care Provider: **UNKNOWN**
Previous Provider:
Alias: **JEAN AMORE** Imm Labels: **N**

Parent/Guardian Information

MOTHER: (1 of 1)

Parent/Guardian
Relationship:
Language:
Reminders:
Phone:
Home Phone:

Child Health Profile

Hearing Assessment Screen

Child Information -08/14/2009	
Demographics	Name: KAREN SMITH KIDSNET ID: 450433
Newborn Summary	Date Of Birth: 11/01/2004 Age: 4y 9m Gender: FEMALE
Child Summary	KIDSNET Status: ACTIVE PCP: DOH TEST PRACTICE
Personal School Form	Parent/Guardian: JANET SMITH Date of birth: 02/11/1980
Newborn Hearing Screening Results	
Lead Poisoning	Date Tested Screen Type Result
Early Intervention	12/04/2004 OAE RIGHT EAR PASS
Immunization	12/04/2004 OAE LEFT EAR PASS
WIC	Screening Result: Pass
Hearing Assessment	Audiological Recommendation: DISCHARGE FROM RIHAP, NO FURTHER ACTION
Newborn Developmental Risk Assessment	Risk Factors:
Home Visit	Detailed Audiological Diagnostic Information
Newborn Bloodspot	Date Tested: 06/25/2009 Audiologist: KIM AUDIOLOGIST
Vision	Diagnosis Left: CONDUCTIVE-PERMANENT Diagnosis Right: NORMAL
User Management	Degree Left: MILD Degree Right: N/A
	Tests performed: Tympanometry,DPOAE,Bone Conduction
	ICD9: Conductive hearing loss unilateral (389.05)
	Secondary ICD9:
	Risk Factors:
	Comments: retest in 6 months

Birth Weight: Grams: **2985** Pounds: **6** Ounces: **9**

Immunization Information

Immunizations Prior to Discharge or in the First Week of Life

Vaccine	Date Administered	Lot #
HEPB CHILD	10/17/2003	0218 N

Hepatitis B Condition of Mother: **HBsAG NEGATIVE**

Hearing Assessment Information

Date Tested	Screen Type	Result
10/17/2003	OAE RIGHT EAR	PASS
10/17/2003	OAE LEFT EAR	PASS

Screening Result:

Audiological Recommendation:

Risk Factors:

Newborn Child Summary Report

Newborn Developmental Risk Assessment

Risk Disposition: **NEGATIVE** Risk Summary: **NEGATIVE**

Known Established Conditions:

NONE

Home Visit

Agency:

Agency Phone:

Fax:

Newborn Heelstick

Guthrie #: **YF1021030338** Blood Drawn Date: **10/18/2003**

Results: **ALL CONDITIONS NORMAL**

Specimen
Received Date: **10/21/2003**

Benefits of Integration



- Population based data
- Knowing denominator – who hasn't had a service as well as who has
- Shared resources can do what individual programs cannot
- Shared demographic data
- Single access for multiple data sources
- Support for Medical Homes and Maternal Child Health Programs

Challenges of Integration



Resources

-  The Business Case

-  Acquiring Expertise

-  Funding Streams

Provider Relations and Participation

-  Training

-  Encouraging Use of Technology

Challenges cont.'d



👤👤👤 Data Quality

- 👤👤👤 Matching and de-duplication

- 👤👤👤 Timeliness and Completeness

- 👤👤👤 Data Accuracy

👤👤👤 Data Standards

- 👤👤👤 Interoperability and data exchange

- 👤👤👤 Working with EMRs

👤👤👤 Magical Thinking

Uses of integrated data



-  Quality Assurance
-  Program Evaluation/Performance Measures
-  School Entry Requirements
-  Point of Service Access
-  Medical home assuring services

Medical Home



American Academy of Pediatrics defines a medical home as primary care that is:

*** Accessible

*** Continuous

*** Comprehensive

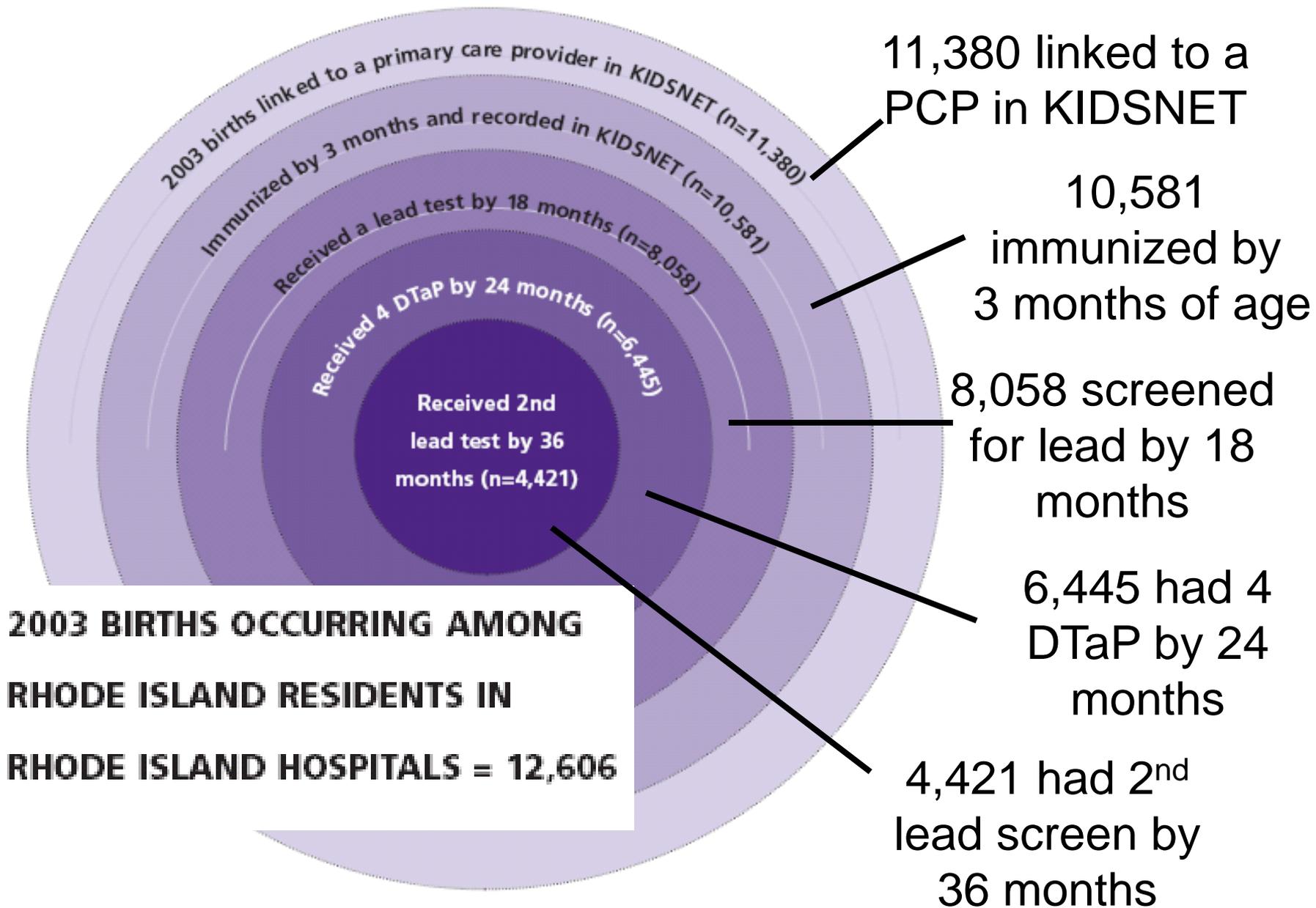
*** Family Centered

*** Coordinated

*** Compassionate

*** Culturally Effective

Medical Home – How are we doing as a state?





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