Onboarding Consensus-based Recommendations

Education Steering Committee Webinar

February 11, 2019
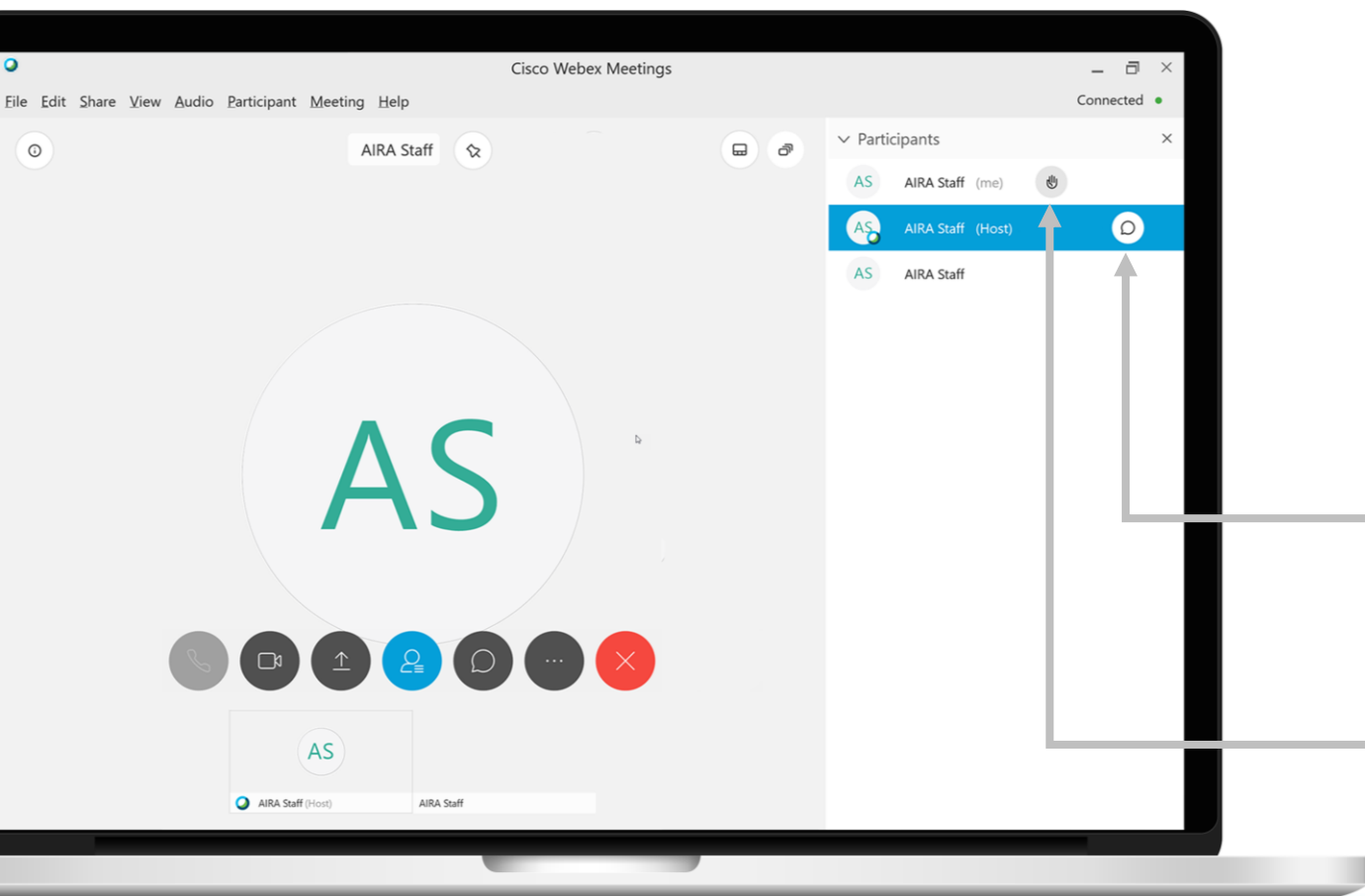
• **How do I ask a question?**

- • There will be time allotted for Q&A following each of the updates, to unmute your line press *6
- • Via WebEx:

Select the chat icon next to the host and type question into the chat box.

Select the hand icon next to your name and you will be called on.

All phone lines
are muted

This meeting is being recorded
and will be posted on the
AIRA repository

Onboarding Guide

- **Project Overview**
- **Document published on AIRA Repository**
  - Jan 10th, 2019

http://repository.immregistries.org/resource/onboarding-consensus-based-recommendations/

ONBOARDING
CONSENSUS-BASED
RECOMMENDATIONS
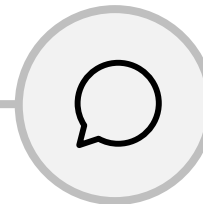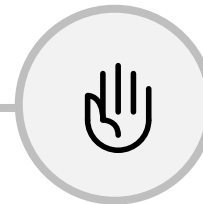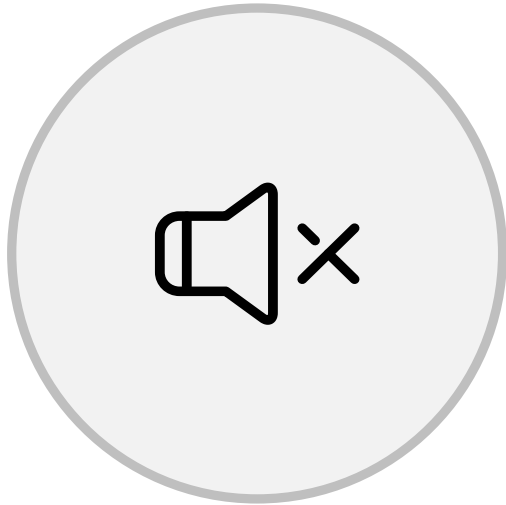
NOVEMBER 2018

AIRA
AMERICAN IMMUNIZATION
REGISTRY ASSOCIATION

Today's Speakers

- **Danielle Reader-Jolley**
  - AIRA Consultant
- **Angie Felt**
  - Minnesota Dept of Health
- **Steve Hill**
  - Cerner EHR system

Document Overview

Presented by Danielle Reader-Jolley

Document Overview

PROCESS – IMPROVEMENTS AND BEST PRACTICES

STEP 1: DISCOVERY & PLANNING
- Registration
- IIS Site Enrollment
- Kick Off Call
- Forms Completion
- Other Pre-Prep Activities (Checklists, Self-service testing, Code comparisons, Etc.)

STEP 2: DEVELOPMENT AND TESTING
- Connectivity and transport
- Testing environments/platforms
- Use of test data or production data
- Volume of records needed for testing/validation
- Technical vs. programmatic testing
- Importance of ACKs
- Self-service opportunities

STEP 3: PRODUCTION APPROVAL
- Production approval
- Pre-production forms completion
- Training (optional)
- Move provider credentials to Prod

STEP 4: ONGOING MONITORING
- Short-term production monitoring
- Long-term production monitoring
- Re-onboarding triggers

SPECIAL: QUERY/RESPONSE
- Differences in processes and procedures compared to standard interfaces (VXU only)
- Discovery and Planning
- Development and Testing
- Production Approval and Monitoring
- Additional steps

IMPLEMENTATION CONSIDERATIONS AND BEST PRACTICES

EHRS & IMPORTANCE OF STANDARDS
- Understanding EHR staffing structures and product business models
- Coding to standards
- Implementation of multi-state solutions
- Special guidance for pharms or other specialty vaccinators

MANAGING THE BACKLOG
- Limited resources and staffing
- Managing a queue (tracking, prioritization, timelines)
- Creating efficiencies (check lists, prerequisites, pre-prep activities, reporting hubs)

DOCUMENTATION
- Posting documents to website
- Communicating standards and state-specific requirements
- Communicating expectations and thresholds for success
- Simplifying onboarding plans and documents
- Information repositories for staff

COMMUNICATION
- Welcome emails
- Kick-off calls
- Pre-production/close-out calls
- Proactive communications
- EHR vendor-provider-IIS dynamics

How to read the document...

- Summarized Considerations and Recommendations at the end of each major sub-chapter
- **Bolded statements** in text are key points for readers who like to skim
- Notes represent sidebar-type commentary related to section content
- Intra-document hyperlinks to related content

Typical Onboarding Process

STEP 1: DISCOVERY & PLANNING

STEP 2: DEVELOPMENT AND TESTING

STEP 3: PRODUCTION APPROVAL

STEP 4: ONGOING MONITORING

SPECIAL: QUERY/ RESPONSE

CONNECTIVITY AND INITIAL MESSAGE SUBMISSION

MESSAGE VALIDATION

DATA QUALITY REVIEW AND DATA VALIDATION

Short Term Monitoring

Long Term Monitoring

Primary Onboarding Stakeholders

- IIS Staff
- EHR Vendor
- Provider
- HIEs

IIS Staff

EHR Vendor

Provider

HIE
(where applicable)

General Problems

- Providers are spending weeks or months waiting to onboard
- Providers are spending weeks or months in the onboarding process after they begin actively onboarding
- Jurisdictions have implemented local requirements or local interpretations of the HL7 standard requiring one-off solutions
- Existing processes are heavily dependent on IIS onboarding resources
- Existing interfaces using legacy standards and technologies

Project Objectives

- Standardize the onboarding process across jurisdictions
- Improve onboarding process efficiencies by streamlining activities and introducing appropriate support tools and technologies
- Decrease the number of providers waiting in queue and the amount of time providers spend in process from start to finish
- Facilitate the transition of existing interfaces to align with current and future messaging and transport standards
- Maximize limited resources - time, money, and staff for all onboarding partners
- Improve stakeholder relations

Overarching Strategies

- **Minimize variation across jurisdictions**. Strive to align with HL7 implementation guidance and standard code sets except where otherwise required by state law or mandate.

- **Manage expectations** through well-crafted onboarding documentation and proactive written and verbal communication between stakeholders.

- Identify opportunities to **reduce reliance on IIS staff participation** by automating manual processes and strategically leveraging IIS reports and supporting tools/technologies.

- Create opportunities for onboarding providers and EHR vendors to **conduct preliminary testing and issue resolution independently**.

- **Leverage general momentum and provider enthusiasm** by focusing IIS resources on providers with the most interest and readiness to proceed.

Problem: Too Long Waiting to Onboard

- Solutions:
  - Implement an online registration tool
  - Use information collected in the registration tool to automatically trigger subsequent steps in the onboarding process
  - Provide a readiness checklist that includes completion of all required forms, ability to produce a correctly formatted HL7 2.5.1 message, and support for required code sets
  - Direct provider/EHR vendor to educational resources:
    - Onboarding Plans and Checklists
    - HL7 Requirements and Resources
  - Eliminate unnecessary pre-requisites and waiting periods

STEP 1:
DISCOVERY
& PLANNING

Problem: Too Long in Process

- Solutions:
  - Maintain a tool to track and document provider progress throughout the onboarding process
  - Implement testing tools to help automate portions of the testing process
  - Identify and create opportunities for providers/EHR vendors to conduct independent testing and issue resolution
  - Test in a production-quality environment using 2-weeks worth of production/production-quality data
  - Determine the level of data quality testing that is appropriate for the onboarding process (can vs. should; onboarding vs. monitoring)

Problem: Off-Standard Requirements

- Solutions:
  - Align with HL7 implementation guidance and standard code sets except where otherwise required by state law
  - Support and promote the current CDC- and ONC-endorsed standards for HL7 messaging and transport
  - Develop short delta guides for noting where the jurisdiction deviates from the HL7 implementation guide
  - Improve community interpretation of implementation guidance around common problem areas (e.g. VFC, OBX, ACK, CVX)

Problem: Reliance on IIS Staff

- Solutions:
  - Focus IIS resources on providers with the most interest and readiness to proceed (readiness, resources, enthusiasm)
  - Implement testing tools to help automate portions of the testing process
  - Identify and create opportunities for providers/EHR vendors to conduct independent testing and issue resolution
  - Eliminate/minimize manual data quality review activities to the extent possible

Problem: Legacy Standards/Technologies

- Solutions:
  - Support and promote the current CDC- and ONC-endorsed standards for HL7 messaging and transport for IIS interfaces (e.g. HL7 2.5.1 and SOAP/WSDL)
  - Use improved onboarding process(es) to bring older interfaces up to speed
  - Leverage abbreviated testing protocols when updating existing interfaces

Onboarding Support

DOCUMENTATION

COMMUNICATION

ONBOARDING TOOLS AND ATTRIBUTES

TRAINING

ONBOARDING PARTNERS

Appendix Overview

IIS Perspective

Presented by Angie Felt

Onboarding Consensus-Based Recommendations

Angie Felt – MIIC Outreach and Data Exchange Coordinator

- Takeaways

- Strategies

- Improvements

- Tools

- Future

- Best practices – not requirements

- Bottlenecks and managing backlog

  - Queue

  - Data quality testing

Managing Backlog: Managing expectations through good documentation and communication

- Documentation
  - Provider onboarding landing page
  - Immunization Onboarding Process Guide

Process for Working on Data Exchange with MIIC – landing page

Managing Backlog: Managing expectations through good documentation and communication

- Communication
  - Data exchange promotional material
  - Email updates
  - Onboarding survey
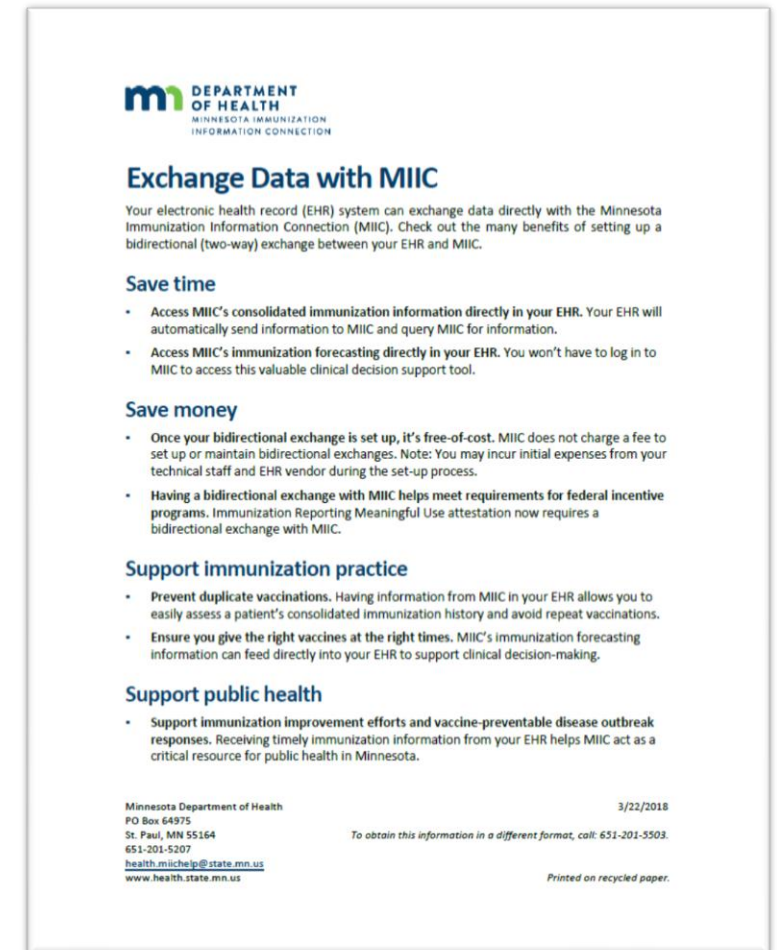
- Consistency

- Data driven process improvement

- Decreased reliance on IIS staff

The onboarding process was clear
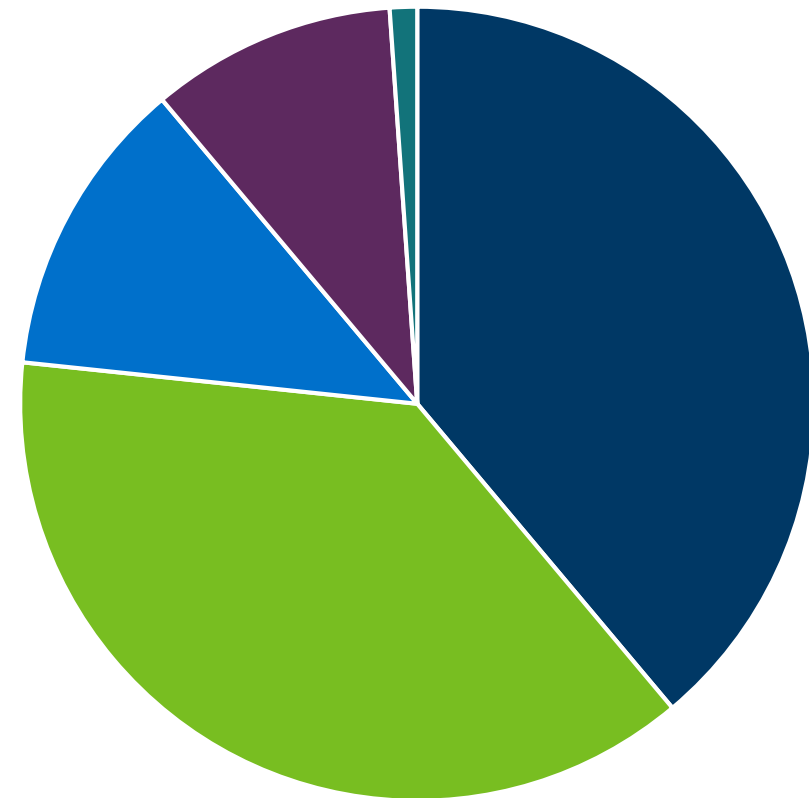
■ Agree Completely   ■ Agree Mostly   ■ Agree Somewhat   ■ Agree Minimally   ■ Agree Not At All

- JIRA
  - Ticket management system
  - Record project details
  - Status
  - Staff assignment
  - Record comments
  - Time tracking

  - Exports reports and data
  - Tag funding sources
  - Dashboard display

JIRA Ticket

Immunization Onboarding (MIIC) (3GAGC) / PO-677

Test Clinic

Edit | Comment | Assign | More ▾ | On Hold | Onboarding: Transport,... | Secondary Program Queue

▾ Details

Type:	⊞ Meaningful Use		Status:	ONBOARDING QUEUE
Priority:	⌃ Major			(View Workflow)
Component/s:	90/10 (3GAGC)		Resolution:	Won't Fix
Labels:	Prod ✏			
Account:	Infectious Disease Epidemiology, Prevention and Control (IDEPC)			
Application ID:	458			
# of EPs:	16			
# of EHs:	1			
MU Program:	Medicare & Medicaid			
Reg/MU Contact-name:	Joe Brown			
Reg/MU Contact-email:	joe.brown@software.com			
Site Tech Contact-name:	Tracy Greene			
Site Tech Contact-email:	Tracy.Green@testclinic.com			
Target Transport:	SOAP Web Services			
Target Message Format:	HL7 2.5.1			
Enhancement Type:	None to HL7 2.5.1 bidirectional			
EHR/LIMS:	Pretend EHR			
# of Facilities:	1			

▾ Attachments

Drop files to attach, or browse.

AIRA Onboarding Webinar_I
16-Jan-2019 10:32 AM   43 kB

▾ People

Assignee:	Angela Felt
Reporter:	Angela Felt
Votes:	0
Watchers:	2 Stop watching this issue

▾ Dates

Created:	18-Apr-2018 11:28 AM
Updated:	2 minutes ago
Resolved:	18-Apr-2018 02:39 PM
Date Registered:	12-Apr-2018
Date Pre-testing Complete:	17-Dec-2018
Date Onboarding Queue:	07-Feb-2019

▾ Collaborators

▾ Agile

View on Board

▾ Activity
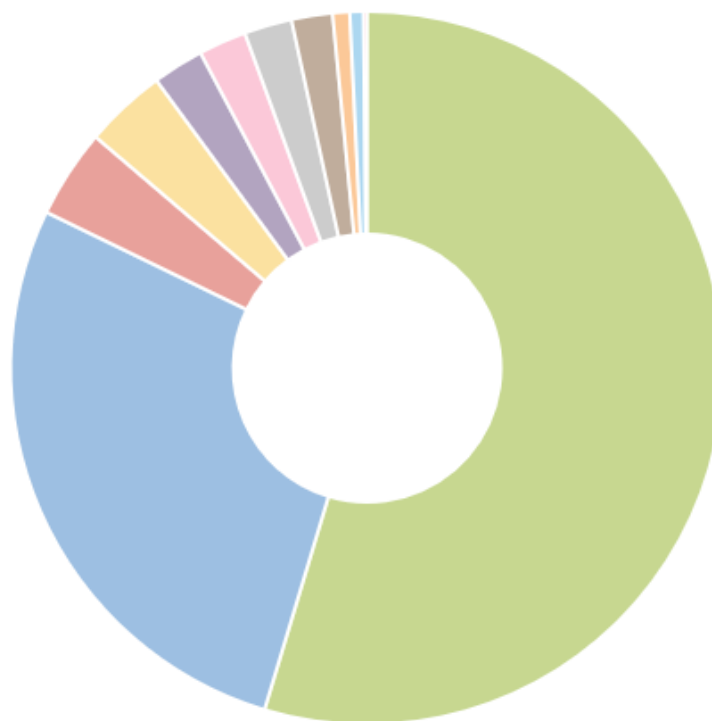
All | **Comments** | Work Log | History | Activity

Angela Felt added a comment - 6 minutes ago

This is an example comment on the progress or a note about this project.

JIRA Dashboard

Onboarding Overview

Pie Chart: Immunization Onboarding (MIIC) (3GAGC)

Status
Total Issues: **646**

	Status	Count
	Closed	353
	Production: Ongoing submission	178
	Primary Program Queue	26
	Onboarding: Transport, format & vocab	24
	Open	15
	On Hold	14
	Onboarding Queue	14
	Secondary Program Queue	12
	Onboarding: Program Review	5
	Production: Post-production monitoring	4
	Reopened	1

- HL7 message content validator

- HL7 feed monitoring

- Onboarding improvement projects
  - HL7 2.5.1 v 1.5 guide
  - Query guide
  - Internal guide
  - FAQ for onboarding stakeholders

DEPARTMENT OF HEALTH

Thank you.

Angie Felt
angela.felt@state.mn.us

EHR Perspective

Presented by Steve Hill

Immunization Onboarding

EHRs and IIS

- Multiple IIS onboarding / connection standards
  - Hurts supportability
  - Changes are managed per state basis
  - Makes for difficult collaborations between IIS

- Moving target on the EHR side for repeatability
  - Data captured is not the same
  - Workflows differ between EHR systems

How Standardization Helps

- Information is the same regardless of jurisdiction
  - Speeds up process for both sides
  - Less time spent on paperwork

- Repeatable
  - Requirements won't vary between states / clients
  - IIS know exactly what to expect regardless of EHR

- Supportable
  - Large health systems connecting to multiple states

Looking Forward

- Makes it easier to identify issues
  - Ex: Certain client doesn't follow spec but all others do

- As the process matures it requires less time individually

- Requires ongoing collaboration
  - Communication of changes in workflow
  - Process improvements
  - Less missed opportunities
  - Minimizing variability
  - Less stress overall

Wrap-Up

Additional Questions?

- To unmute your line press *6
- Via WebEx: type your question into the chat box on the WebEx toolbar and send to HOST

Acknowledgments

Thank You!

- Contact Details
  - **Danielle Reader-Jolley -** AIRA Consultant
    - dreaderjolley@immregistries.org

  - **Angie Felt -** Minnesota Dept of Health
    - angela.felt@state.mn.us

  - **Steve Hill -** Cerner EHR system
    - Steve.hill@cerner.com