



HHLPSS

Training Webinar Q&A

May 20, 2014

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Login & Password

Q1: What if you have not received a login letter and password information?

A1: If you have not received a login letter and password, you have not been entered into the HHLPSS system. You must complete a New User/Token Request Form for HHLPSS if you want access. Once that form is received and processed, you can be added to the system.

Q2: We have had staff changes who have been given access to HHLPSS. How do I handle the changes as far as closing out their access?

A2: If a staff member was sent a new token, that will need to be returned. If you have a new staff member and want to assign the token to them, you must complete a User Token Request Change Form.

Q3: I don't remember receiving any emails with anything to do with tokens. Do I need to email you after this webinar regarding this?

A3: Only Childhood Lead Poisoning Prevention Program contractors and designated agency staff will have access to HLPSS and require a token. Labs reporting blood lead data will not have direct access to HHLPSS.



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Login & Password (Cont.)

Q4: Does our password share with CARES and IDSS?

A4: Yes it does - if you already have a token for CARES or IDSS, that token will work for HHL PSS but you must have completed and submitted the paperwork so we can assign access to HHL PSS.

If you have additional questions or need further clarification on HHL PSS login or password issues contact Janet Lemmermann at (515) 242-5200 or email her at janet.lemmermann@idph.iowa.gov.

General HHL PSS Questions

Q1: Why does the date/calendar appear when you click on blood test page?

A1: Please send screen shot as we can't duplicate this error.

Q2: Can you copy and paste into the notes section from a word document?

A2: Yes.

Q3: Should I separate notes for nursing home visits, family education and information under clinical section and condition of home under environmental?

A3: Yes, because all clinical data (blood lead test, physician, nursing visits, etc.) follow the child from jurisdiction to jurisdiction.

Q4: Where do we find current memos from STELLAR in the system?

A4: All memos and notes entered into STELLAR migrated over to HHL PSS as either Clinical or Environmental case notes. Contact IDPH if you are having trouble locating notes for a specific child or address.

Q5: Where would notes go from the nursing visual risk assessment? Condition of paint/ etc.

A5: If the risk assessment is conducted by a non-certified lead professional (i.e., nurse) then the note would be entered under Environmental-Address Notes-New.

Q6: Is the high exposure letter required for us to send out?

A6: The letters in HHL PSS are templates for your organization to use when contacting the patients family or physician. Most jurisdictions already have a standard letter with their agency logo on it that is used for contacting the patient's family or physician.

Q7: Are you going to send out the PowerPoint slides of webinar?

A7: The video was recorded and a copy will be posted on the Lead Program website at <http://www.idph.state.ia.us/LPP/>.



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General HHLPSS Questions (Cont.)

Q8: Will all STELLAR case notes migrate to HHLPSS?

A8: Yes. All memos and notes entered into STELLAR migrated over to HHLPSS as either Clinical or Environmental case notes. Contact IDPH if you are having trouble locating notes for a specific child or address.

Q9: What is census tract, parcel no and district?

A9: These are additional geographical borders, Iowa will not be using them.

Q10: Does it matter whether we use Internet Explorer or Firefox when logging into HHLPSS? I know some programs prefer one or the other.

A10: Both should work fine, along with Google Chrome.

Q11: Will a jurisdiction be able to put their own logo onto the clinical letters?

A11: Yes, but it must be copied and pasted for each letter.

Q12: Where do I get a Manual that Janet talked about?

A12: The HHLPSS Guidance Manual will initially be located on the Lead Bureau webpage at <http://www.idph.state.ia.us/LPP/>.

If you have additional questions or need further clarification on HHLPSS Reports contact Kevin Officer at (515) 242-5902 or email him at kevin.officer@idph.iowa.gov.

HHLPSS Alerts

Q1: Are the alerts sent via email to the appropriate people or do we need to login to HHLPPS on a daily basis?

A1: No, Alerts and a link to the required action are on the home page of HHLPSS. IDPH recommends checking for alerts on a daily basis.

Q2: If there is a very high BLL result, will we be notified via phone like before? If the result comes in on a Friday and I don't check HHLPSS until the following Friday there could be a delay.

A2: IDPH will contact local CLPPPs directly when BLL's are equal to or greater than 20 micro grams per deciliter. High results (above 40) will have a panic alert - all other EBL's will have a normal alert. Jurisdictions should check HHLPSS daily for alerts.



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HHPSS Alerts (Cont.)

Q3: On the access into HHPSS for alerts, when that person goes on vacation or extended leave what is the process to transfer alerts?

A3: Each jurisdiction will need to determine how to check for EBL's. Currently STELLAR does not have alerts. There are reports or other ways to determine cases.

Q4: Will an alert come for blood leads 10 and above or a higher level?

A4: Yes, alert triggers are based on the same protocols outlined in the State of Iowa Plan for Childhood Blood Lead Testing and local CLPPP contracts.

Q5: What events are included in the alerts?

A5: There are over 20 different alerts setup for clinical, environmental, and administrative purposes. Events triggering alerts include EBL events, new investigations, jurisdiction changes, panic alerts for EBL's greater than 40, transfer case and investigation, no case manager or investigator assigned.

Q6: If the alerts are on the home screen, can't we set up more than one person to receive them?

A6: No, only one person per alert (clinical or environmental) per jurisdiction.

Q7: Do the alerts come via email like IDSS?

A7: No, they are on your HHPSS home page.

Q8: If the alerts are going to one person only in the jurisdiction what is an agency to do if the person is on vacation?

A8: Each jurisdiction will need to determine how to check for EBL's. Currently, STELLAR does not have alerts. There are reports or other ways to determine cases.

Q9: Can more than 1 person receive alerts?

A9: No, only one person per alert per jurisdiction.

Q10: Are the alerts populated to remind us about when a home visit, Hgb, developmental referral, investigation is needed?

A10: No, only Panic (EBL greater than 40), transfer case and investigation, new case and investigation, no case manager or investigator assigned.

Q11: Will an alert be sent to a local jurisdiction if a EBL child moves into that jurisdiction.

A11: Yes.

Q12: If the contact for the Alerts is sick or on vacation, then how will the alert message be sent and to whom?

A12: Each jurisdiction will need to determine how to check for EBL's. Currently STELLAR does not have alerts. There are reports or other ways to determine cases.



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HHL PSS Alerts (Cont.)

Q13: What if the person receiving the alerts is on vacation or some other extended absence - would a co-worker need to use the designated contact's sign-in to be able to view alerts?

A13: Each jurisdiction will need to determine how to check for EBL's. Currently STELLAR does not have alerts. There are reports or other ways to determine cases.

Q14: Will the alerts be sent by email or via what method to notify the health department?

A14: No, they are on the home page of HHL PSS.

Q15: When do we assign who will get the alerts for clinicals and who will get the alerts for environmental?

A15: Each jurisdiction was sent a message asking who the initial case manager and investigator is for their jurisdiction. Contact Rob Walker to assign or reassign HHL PSS alerts.

If you have additional questions or need further clarification on HHL PSS alerts contact Rob Walker at (515) 281-0908 or email him at robert.walker@idph.iowa.gov.

Jurisdictions

Q1: So we won't be able to see any lead tests done in a different jurisdiction? For example: If a child moved from Des Moines to NE Iowa there would be no history of their BLL results or case information?

A1: All historical clinical data (BLL tests, notes, other medical evaluations, etc.) accompanies the child to the new jurisdiction. The old jurisdiction will no longer have the child's clinical data in its HHL PSS system. Environmental case data remains within the jurisdiction and does not transfer with the child to the new jurisdiction.

Q2: What triggers the migration of an EBL child to a new jurisdiction?--A test result in the new jurisdiction?

A2: Yes, when a child receives a BLL test and the address listed is in a new jurisdiction, then the child will be assigned to a new jurisdiction within HHL PSS.

Q3: Will it ever be possible to see all children in HHL PSS but to claim the ones that are in our county - similar to Cares?

A3: No, HHL PSS does not allow total access (ability to see and change anything) or jurisdiction access. For security and HIPPA reasons, we chose tighter security by only allowing access to information within your jurisdiction.



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Jurisdictions (Cont.)

Q4: If a child moves to my jurisdiction, how will I know if they are in HHL PSS but in another county or have never yet been lead tested?

A4: When a child moves to a new jurisdiction and has never had a BLL test they will not be in HHL PSS. Any child with an EBL that changes jurisdiction the new jurisdiction will receive an alert.

Q5: Is a jurisdiction a county or a CLPPP?

A5: In HHL PSS a jurisdiction is a contracted area or a local CLPPP service area, similar to CLPPPs in STELLAR.

Q6: Will an alert be sent to a local jurisdiction if a EBL child moves into that jurisdiction?

A6: Yes.

Q7: If an address is edited or changed on our end will the child no longer be linked to that address because of the changes?

A7: If you edit an address it changes the address to the new data. If you add a new address for a child it will include that address under the child's file.

Q8: Can two individuals from the same jurisdiction be contacted about alerts?

A8: No, one person per jurisdiction per alert.

Q9: Will we be able to access a child's blood lead test results from another county or only our local data?

A9: Each Jurisdiction (CLPPP) will be able to access child data from counties within their Jurisdiction.

If you have additional questions or need further clarification on HHL PSS Jurisdiction issues contact Rob Walker at (515) 281-0908 or email him at robert.walker@idph.iowa.gov.

HHL PSS Error Corrections

Q1: Will IDPH do all the corrections on Lead Care II results themselves?

A1: Yes, provided we are notified of corrections that need to be made.

Q2: If the lab is entering the info regarding blood tests, what if we determine there is an error? Or how does the lab know if it is confirmatory? Do they know not to enter as a venous if it is run on a Lead Care analyzer?

A2: Labs would not have the information to determine if a test is confirmatory. IDPH usually has that information, and will ensure that no Lead Care result is recorded as a venous sample.



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HHLPSS Error Corrections (Cont.)

Q3: Will the individual jurisdictions be able to change patient information incorrectly entered by the labs?

A3: No they will not. The jurisdictions must notify IDPH if there are corrections that need to be made.

If you have additional questions or need further clarification on HHLPSS Error Correction issues contact Janet Lemmermann at (515) 242-5200 or email her at janet.lemmermann@idph.iowa.gov.

HHLPSS Events

Q1: Are events to be associated with an address or a patient?

A1: Both. Some events are related to the address, some events are related to the child. Each will go in their respective locations.

Q2: In HHLPSS does there have to be an EBL child linked to the address to open the environmental investigation field? Example opening a HUD referral that does not have an EBL child linked to it.

A2: Yes, HHLPSS will automatically open an investigation. Additional information can be provided for that address, but it will not be considered an EBL investigation.

If you have additional questions or need further clarification on HHLPSS Event issues contact Rob Walker at (515) 281-0908 or email him at robert.walker@idph.iowa.gov.

Lab BLL Data

Q1: What info will the lab be required to report? Guardian, phone number, physician? We need enough info to follow up on the case.

A1: Patient: Name, date of birth, address, city, state, zip, Guardian, Patient/Guardian phone; Physician: Physician name, address, city, state, zip, phone, sex, race, and ethnicity.

Q2: If the lab is entering the info regarding blood tests, what if we determine there is an error? Or how does the lab know if it is confirmatory? Do they know not to enter as a venous if it is run on a Lead Care analyzer?

A2: Labs would not have the information to determine if a test is confirmatory. IDPH usually has that information, and will ensure that no Lead Care result is recorded as a venous sample.

Q3: Will the blood lead result page identify ordering physician?

A3: It should, but if not, contact us so we can update the patient's information.



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Lab BLL Data (Cont.)

Q4: Will the reporting lab be dealing with much of the "case" part of it?

A4: No, labs only analyze and report blood lead results.

Q5: With the investigation information, how will the lab person know this? We just report the result we get from the blood to the doctors and then submit them. We don't have any contact with the patient.

A5: Again, labs are only responsible for analyzing and reporting BLL tests. Clinical and environmental case managers will still be responsible for contacting the doctor, family, property owner, etc.

Q6: How is the patient information already in HHL PSS? Is it transferred from our lab system?

A6: If a patient is already in HHL PSS and a new lead result is received, it is matched in the import process, and the new lab result is assigned to the appropriate patient. All prior STELLAR data will be migrated into the HHL PSS Production system before going live.

Q7: Who will be entering the Lead Care II tests?

A7: All tests will be electronically imported into HHL PSS. Any results received on paper will be entered by IDPH into the spreadsheet and imported into HHL PSS.

Q8: Will the individual jurisdictions be able to change patient information incorrectly entered by the labs?

A8: No they will not. The jurisdictions must notify IDPH if there are corrections that need to be made.

If you have additional questions or need further clarification on HHL PSS blood lead data issues contact Janet Lemmermann at (515) 242-5200 or email her at janet.lemmermann@idph.iowa.gov.

Reports

Q1: What info will the lab be required to report? Guardian, phone number, physician? We need enough info to follow up on the case.

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