

Division of Vital Statistics | Newsletter

October 2021

Cooperative Agreement Corner



Our Cooperative Agreement with the National Association for Public Health Statistics and Information Systems (NAPHSIS) supports activities for jurisdictions. Upcoming opportunities are provided below.

November VSCP Directors Webinar | NAPHSIS invites you to the monthly VSCP Project Directors Webinar on the second Wednesday of each month at 2 p.m. Eastern. November Topics: Project to Reduce Days to File Death Records & Cause of Death: Implementing Dropdowns and/or Extracting from Electronic Health Records. Please register to join us on November 10, 2021 at 2 p.m. Eastern.

2022 Vital Statistics Cooperative Program (VSCP) Base Contract

The Office of Acquisition Services (OAS) plans to send the base VSCP contracts to jurisdictions for signature the week of December 10th through 14th. OAS may have already engaged with your jurisdiction with the expected completion date. The intent of the early communication is so jurisdictions can plan to have someone on standby to sign the contracts during that time. Please be aware that we cannot fund the 2022 VSCP task order until the base contract is signed by your jurisdiction. If you have questions or concerns, please

communicate with your assigned Vital Statistics Specialist.

<u>Vital Statistics Modernization Community of</u> **Practice**



NCHS in collaboration GTRI, MITRE, NAPHSIS, jurisdictions and technical partners participated in a virtual HL7 FHIR Vital Records Death Reporting (VRDR) Implementation Guide

connectathon from September 13-15, 2021. The purpose of the event was to validate the **HL7 FHIR Vital Records Death Reporting** Implementation Guide while allowing jurisdictions and Medical Examiners and Coroners offices to assess their readiness with FHIR based interoperability. The HL7 FHIR Vital **Records Death Reporting Implementation** Guide (VRDR IG) documents the FHIR specifications for use in sending death records to NCHS and back to the states. The event was well attended with representation from Georgia, Hawaii, New Hampshire, New York City, New York State and Utah along with their vendors/technical partners. Participating vendors and technical partners include Genesis and MDI log, MITRE, GTRI, ehealthsigns, hi3Solutions, and RUVOS.

Overall, the event was successful with all participants being able to generate and submit a FHIR message. NCHS uncovered some bugs in the tools used by the Community (e.g., Canary, .NET VRDR library, Java VRDR library, etc.) which were fixed. The process also uncovered

opportunities for improving the FHIR messaging process.

Some of the lessons learned across the two workflows include:

- It is not necessary to have a perfect implementation to participate in a connectathon. Participating in the event is an opportunity to learn more about FHIR and its implementation. Participants can be at varying levels of maturity when participating.
- Using collaboration tools like Zulip ChatonFHIR, an open-source tool and portal to post and respond to questions worked very well. (Death on FHIR - FHIR Community - Zulip)
- Collected feedback related to the VRDR IG to include:
 - Some fields should be required based on business rules.
 - Some fields must be optional based on differences in what jurisdictions collect.
 - Using Standard HL7 coding system would make implementation more straightforward.
- 4. Several participants mentioned that while the virtual online forum 'works' they miss the in-person interaction and collaboration that is offered by live events. In comparison, the online events felt a bit siloed and isolating even though there were open zoom call lines available for virtual interaction.

Some next steps include iterating and improving the VRDR IG, moving from testing via

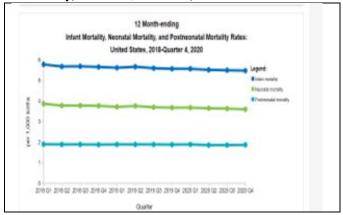
manual upload to STEVE 2.0 to testing via an automatable API and increasing the number of participating jurisdictions. To learn more about the September HL7 FHIR connectation go to: https://confluence.hl7.org/display/FHIR/2021+ -+09+Connectathon+28

NCHS wants to thank all of their jurisdictions and technical partners for their participation in the event.

NCHS will be participating and supporting partners in the January 10-12, 2022 virtual connectathon where both workflows and the VRDR IG and MDI IG will be tested and validated. For more information about this virtual event, go to:

https://www.hl7.org/events/fhirconnectathon/

Notable Publications/Data Briefs Quarterly Provisional Estimates of Infant Mortality, 2018-Quarter 4, 2020



This report was released October 14 and can be found at this <u>link</u>. It showed no significant change in the infant mortality rate for the 12-month period ending with quarter 4, 2019 compared with the same period for 2020 (from 5.58 to 5.49 infant deaths per 1,000 live births).

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