

A Newsletter from



SHARE

State Health Alliance FOR Records Exchange

the State Health Alliance for Records Exchange



What's Inside?

Come See SHARE in Action
New Connections
Health Information Technology (HIT) News
Success Story



Come See SHARE in Action

Arkansas Academy of Family Physicians 75th Annual Assembly
August 3rd-5th Little Rock, Arkansas

Arkansas Osteopathic Medical Association 37th Annual Convention
August 10th-14th Branson, Missouri

2022 Immunization Summit
August 19th North Little Rock, Arkansas

Civitas Networks for Health 2022 Annual Conference
August 21st-24th San Antonio, Texas

The Arkansas Chapter of the American Academy of Pediatrics 2022 Conference
August 26th-27th Little Rock, Arkansas

2022 UAMS Stroke Program Conference
September 21st-22nd Hot Springs, Arkansas



SHARE Welcomes Our New Connections!



School Based Telehealth



HIT News

Improving Information Sharing in Arkansas for Children in Foster Care

To improve data sharing while advancing health equity, SHARE, the Arkansas statewide health information exchange, as well as child welfare and medical stakeholders came together to solve the statewide problem of data exchange of children while in protective custody. According to the Department of Human Services - Division of Children and Families (DCFS) monthly reports, as of August 2021 there were 4,842 children in the Arkansas foster care system. Children in protective custody have more medical, behavioral, and developmental problems that require more health care services than the general population. Also, many times the child's health care providers do not know when their patients are in protective custody and are not privy to the critical social history collected by child protective services. Arkansas Children's Care Network (ACCN) a statewide pediatric clinically integrated network, DCFS, and SHARE worked with a common goal of automation to provide faster communication between healthcare providers and DCFS, using the existing SHARE infrastructure.

Sample Report

DCFS Custody Change Report



Patient ID	Last Name	First Name	DOB	Gender	Child Removal	Child Return Date	Custodian	Case Worker	Email
10790	Ball	Lucille	10/24/2008	F	8/12/2022		DCFS	Carol Tim	carol.tim@dhs.arkansas.gov
18133	Taylor	Mary	3/30/2005	F	7/1/2022	8/12/2022	Susie Taylor	John Doe	john.doe@dhs.arkansas.gov
37596	Smith	Joe	9/1/2017	M	8/13/2022		DCFS	Jane Doe	jane.doe@dhs.arkansas.gov
18133	Duck	Donald	2/4/2022	M	8/13/2022		DCFS	Mary State	mary.state@dhs.arkansas.gov
87664	Mouse	Minie	3/15/2015	F	8/12/2022		DCFS	Carol Tim	carol.tim@dhs.arkansas.gov
18133	Loud	Laurie	5/18/2020	F	12/15/2020	8/12/2022	Lloyd Loud	John Doe	john.doe@dhs.arkansas.gov
87008	Gilmore	Rory	4/11/2016	F	8/10/2022	8/13/2022	Julie Jane	Jane Doe	jane.doe@dhs.arkansas.gov
18133	Glitter	Poppy	9/19/2007	F	8/12/2022		DCFS	Mary State	mary.state@dhs.arkansas.gov
90763	VonSweet	Penelope	9/19/2010	F	8/12/2022	8/12/2022	pre-adoptive parents	Jane Doe	jane.doe@dhs.arkansas.gov
18133	Wreck	Ralph	7/1/2012	M	7/5/2018	8/12/2022	Adopted	Mary State	mary.state@dhs.arkansas.gov

This report is a summary of your attributed patients that have had a DCFS custody change. It lists the date the custody change took place as well as the DCFS Primary Health Service Worker's contact information. Please note, custody change may affect patient's future scheduled appointments. Please be mindful of encryption when sharing PHI. DCFS has a Direct Secure Messaging address: dcfs@ohit.sharear.net. If you do not receive a response from the assigned case worker within 48 business hours, please contact Foster Care Manager daisy.duck@dhs.arkansas.gov or at 501-555-5555. If you have any questions about this new report, please contact SHAREHealth@arkansas.gov

Today, when a child enters protective custody and is assigned a case worker, a message containing the case worker and child's information is sent to SHARE. SHARE then matches the child up with their medical information using an electronic master patient index and leverages the existing notification services to notify the Primary Care Physician (PCP) and care team that the child is in DCFS custody. These daily reports are pushed to the PCPs utilizing Direct Secure Messaging and the care team is alerted that there is a new DCFS Custody report in their inbox. The care team then utilizes this information to communicate the child's current treatment plan with the case worker and to update who has access to the child's protected health information (PHI).

When children leave protective custody, SHARE uses the same channels to relay the change to PCPs and the care teams. The patient's care team then uses this information to make appropriate changes in guardianship information and remove DCFS's access to PHI.

Success Story

AR NextStep Counseling Services Integrates PIMSY EMR with SHARE HIE

The benefits of health information exchange (HIE) and electronic health records (EHR) are often seen in terms of coordinating care between primary care physicians and medical subspecialists, such as cardiologists, urologists, and orthopedists. Behavioral health is just as important as these other specialties but is often considered a separate entity outside of the scope of the primary care physician's responsibility.

Mental health patients with serious illnesses are often poorly served by the established healthcare system, even with new technologies in use.

One of the solutions for improved mental health treatment is integrated care. Local initiatives, such as the SHARE HIE and AR Nextstep Counseling Services, are now integrated sharing data with their PIMSY EMR to simplify access to behavioral healthcare for vulnerable patients.

SHARE HIE is a vital component for making the medical home a reality. When providers – including behavioral health care practitioners – can share records electronically, a complete picture of the patient's health status is presented to all physicians involved. With the SHARE HIE network in place, treatment plans, medications, and conditions and diagnoses that might affect the patient's state of mind and overall health are accessible to everyone on the continuum of care, eliminating the need to fill in gaps through guessing and decreasing the risk of repeated procedures or misinformation, thereby reducing costs.



NextStep
Counseling Services

“Mental health patients often present unique challenges for primary care physicians and behavioral health specialists alike. By coordinating and combining knowledge through SHARE HIE and integrated care, providers can give these patients the best possible attention, enabling appropriate treatment and recovery, as well as improving their overall quality of life”, said Kendell Camp, LCSW, Chief Executive Officer.