

**New Jersey Department of Health and Senior Services
Child and Adolescent Health Program
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**PROTOCOL FOR DATA ENTRY IN THE CHILDHOOD LEAD POISONING
INFORMATION DATABASE AND COMMUNICATION**

- **Title:** Documentation of case management and environmental activity data in the Childhood Lead Poisoning Information Database and communication with the New Jersey Department of Health and Senior Services (NJDHSS).
- **Purpose:** To establish the protocols and standard operating procedures for the users of the Childhood Lead Poisoning Information Database for:
 - A. Documenting data; and
 - B. Communicating with NJDHSS about duplicate records.
- **Scope:** N.J.A.C. 8:51 Appendix D is applicable to all case managers, public health nurses, environmental inspectors, supervisors, and data entry personnel at the local health departments who access the Childhood Lead Poisoning Information Database.
 - Protocol A: Documentation of data
 1. Case management activity data and environmental activity data must be documented in the appropriate fields accurately and completely, within [three] *five* working days from the time of data collection and/or activity.
 2. Data entry may be performed either by the case managers/lead inspectors or by designated, trained data entry personnel.
 3. Notes should only be used for the documentation of items pertaining to situations other than those that can be captured in the EVENTS, ASSESSMENTS, REFERRALS, SAMPLES, or ATTACHMENTS sections.
 4. For every new item pertaining to any of the sections (for example, note, event, assessment, attachment, referral, samples) a new entry should be added (by clicking “**add new**”) rather than appending the new entry to an existing entry.

**PROTOCOL FOR DATA ENTRY IN THE CHILDHOOD LEAD POISONING
INFORMATION DATABASE AND COMMUNICATION
(Continued)**

o Protocol B: Communicating with NJDHSS about duplicate records

When duplicate addresses and/or cases are observed, please send a message to your NJDHSS contact person as described below:

1. The message for alerting NJDHSS about duplicate patients must contain the following information:
 - i. Patient identification number;
 - ii. Which patient identification number is to be kept;
 - iii. Patient Names (if different spellings, mention all);
 - iv. Patient Date of Birth (DOB) (if different, mention all); and
 - v. Correct name and DOB.

2. The message for alerting NJDHSS about duplicate or incorrect addresses must contain the following information:
 - i. All street addresses displayed;
 - ii. Correct street address (if applicable);
 - iii. ZIP code(s);
 - iv. Correct ZIP code (if applicable); and
 - v. Patient name and DOB.