Best Practices for Sharing Race, Ethnicity, and Language Data

This guide provides health care organizations with practical recommendations for enhancing the completeness and usability of the race, ethnicity, and language data they are submitting to VITL and the Vermont Health Information Exchange. The scope of this document is data documentation and transmission, it does not cover other key aspect of data quality such as how and when individuals are asked questions about their race, ethnicity, and language.

1. **Review Documentation, Template Mapping, and Customization**
   a. Identify where your providers and staff are documenting race, ethnicity, and language (REL) data in your organization's electronic health record (EHR) and ask your vendor if those fields are being sent to VITL.
   b. If your EHR includes customized templates:
      o Review the fields in your EHR being used by your providers and staff. It is best if these are drop-down lists and do not accept free text entries.
      o Ask your vendor if they are exporting the information in the identified fields into the HL7 messages your organization sends to VITL.

2. **Collaborate with Your EHR Vendor to Ensure Standardization**
   a. Work closely with your EHR vendor to ensure that the data your providers and staff document meets the demographic data standards defined by the United States Core Data for Interoperability (USCDI).
   b. If the data your providers and staff are collecting doesn't align with USCDI standards supported by your vendor, collaborate with your vendor to ensure that your documentation is translated into a standard format.

3. **Considering Adding Data Validation and Quality Assurance Processes**
   a. Conduct periodic audits of your template configurations to identify and correct discrepancies that may be introduced by adjustments to your EHR over time.
   b. Ask your EHR vendor if there is a way to implement validation rules to ensure ongoing accuracy and consistency of REL data.

4. **Send the Data to VITL**
   a. Work with your Electronic Health Record (EHR) vendor and VITL to establish an Admission, Discharge, Transfer (ADT) interface for submitting demographic updates if you have not established an ADT to send to VITL already. This data type is the one best suited to transmitting up-to-date, complete REL data from your organization to VITL.

Vermont's nonprofit health data sharing network
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