

The following case event codes must be entered into HHLPSS in order for that event to be counted toward a specific performance measure. **Case event details for the quarterly reporting period must be entered into HHLPSS by the 7th of the preceding month (i.e., Q1 by October 7th, Q2 by January 7th, Q3 by April 7th, and Q4 by July 7th) in order to be counted in the Quarterly Performance Measure Report.** IDPH will submit performance measure, case detail, and HHLPSS reports to the CLPPP contractor during the 3rd week of each month.

CASE MANAGEMENT EVENT DETAIL REPORT CRITERIA
CLINICAL
<p>Home Nursing Visits (HNV)– Home nursing visits done for children with venous blood lead levels greater than or equal to 15 micrograms per deciliter.</p> <ul style="list-style-type: none"> • EVENT TYPE CODE - Home Visit – Nurse (Initial case making event) Follow-up Home Visit – Nurse • COMPLETED DATE – Date HNV was conducted • RESULT CODE- Complete
<p>Referrals for Nutrition Counseling – Referrals for nutrition counseling for children with venous blood lead levels greater than or equal to 15 micrograms per deciliter.</p> <ul style="list-style-type: none"> • EVENT TYPE CODE - Referral • COMPLETED DATE – Date referral was made or date of HNV • RESULT CODE- Complete
<p>Nutrition Counseling – Nutrition counseling service provided for children with venous blood lead levels greater than or equal to 15 micrograms per deciliter. Nutrition counseling can be provided by local public health nurse during HNV.</p> <ul style="list-style-type: none"> • EVENT TYPE CODE - Nutrition • COMPLETED DATE – Date service was provided • RESULT CODE- Complete
<p>Referrals for Developmental Testing – Referrals for developmental testing for children with venous blood lead levels greater than or equal to 20 micrograms per deciliter.</p> <ul style="list-style-type: none"> • EVENT TYPE CODE - Referral for Developmental Assessment • COMPLETED DATE – Month of reporting period • RESULT CODE- Complete
<p>Developmental Testing – Developmental testing or assessment service provided for children with venous blood lead levels greater than or equal to 20 micrograms per deciliter.</p> <ul style="list-style-type: none"> • EVENT TYPE CODE – Conduct Developmental Assessment • COMPLETED DATE – Date service was provided • RESULT CODE- Complete
<p>Child CONTC or ACTIO event – Contacts made by phone or letter to communicate with a family, a physician, Department of Public Health, or a medical provider about a child.</p> <ul style="list-style-type: none"> • EVENT TYPE CODE - Contact Attempt - Face to Face Contact Attempt - Telephone Contact Tenant – Face to Face Contact Tenant – Mail Contact Tenant - Phone • COMPLETED DATE – Date contact was made or information sent out (mail, email, etc.) • RESULT CODE- Completed

CASE MANAGEMENT EVENT DETAIL REPORT CRITERIA
CLINICAL
<p>Medical Evaluation – Medical evaluation or assessment provided by a physician for children with venous blood lead levels greater than or equal to 20 micrograms per deciliter.</p> <ul style="list-style-type: none"> • EVENT TYPE CODE - Medical – Initial Evaluation (Initial case making event) • COMPLETED DATE – Date contact was made or information sent out (mail, email, etc.) • RESULT CODE- Completed
ENVIRONMENTAL
<p>Initial Inspection Events – All (Medicaid & Non-Medicaid) environmental inspections conducted in homes where an EBL children lives or visits, including in-home daycare and daycare facilities .</p> <ul style="list-style-type: none"> • EVENT TYPE CODE - Inspection Other (Initial case making event) • COMPLETED DATE – Date initial inspection started • RESULT CODE - Complete
<p>EBL Investigation CONTC Events – Contacts made to homeowners, landlords, realtors, or property management company regarding a property that had been investigated or inspected due to an EBL child. Contact types may include scheduling an inspection or checking on the progress of lead hazard remediations.</p> <ul style="list-style-type: none"> • EVENT TYPE CODE - Contact Owner – Face to Face Contact Owner – Mail Contact Owner – Phone • COMPLETED DATE – Date contact was made or information sent out (mail, email, etc.) • RESULT CODE - Complete
<p>Completed Lead Hazard Remediations – A property where it has been verified visually that lead hazard remediation has been completed or that the building has been demolished.</p> <ul style="list-style-type: none"> • EVENT TYPE CODE - Investigation Closed • COMPLETED DATE – Date of visual verification • RESULT CODE - Complete
<p>EBL Investigation INSAB, INSAI, INSAE Events – On-site visits to check on the progress of lead hazard remediations. Also, if a clearance inspection is not completed because it failed the visual inspection and no dust wipe samples were taken; or if the property failed the clearance inspection.</p> <ul style="list-style-type: none"> • EVENT TYPE CODE - Inspection, Abatement-Interior Inspection, Abatement-Exterior Inspection, Abatement – Both • COMPLETED DATE – Date on-site visit was conducted • RESULT CODE – Complete
<p>EBL Investigation Properties Passing Clearance Testing – Properties where it has been verified by dust lead testing that lead hazard remediation has been completed and the property is safe and can be closed in HHLPSS.</p> <ul style="list-style-type: none"> • EVENT TYPE CODE - Clearance Inspection Passed • COMPLETED DATE – Date clearance results verified property passed clearance or date property was verified demolished by a certified lead inspector/risk assessor. • RESULT CODE - Complete
<p>Risk Assessment Inspection – Initial case making (Medicaid or Non-Medicaid) environmental inspections conducted in homes where an EBL child lives or visits, including in-home daycare and daycare facilities.</p> <ul style="list-style-type: none"> • START DATE - Date initial case making EBL inspection started • COMPLETION DATE – Date initial case making EBL inspection was completed on all interior and exterior components of all buildings on property.