BORN Information System (BIS) Respiratory Syncytial Virus (RSV) Data Collection FAQ

The following FAQs pertain to BORN data collection. Provincial partners will address clinical inquiries shortly.

1. How is RSV data collection changing this season at BORN?

The Ministry of Health has announced an expansion of the publicly-funded Respiratory Syncytial Virus (RSV) immunization program. This program will now include immunization (a monoclonal antibody) for all infants and high-risk children up to 24 months of age, as well as a vaccine for pregnant individuals who are 32-36 weeks pregnant and will give birth during the RSV season. The updated data collection will begin this fall, in preparation for the 2024-2025 RSV season.

2. Will I still enter our data in the same way as we did last season?

This depends on your site. For sites manually submitting data, the process for data entry should remain unchanged as the new elements will be included. Sites using electronic medical records (EMR) or upload to send data may continue their usual process; however, some may face challenges integrating these new elements into their EMR systems. We are developing solutions for these sites and will be in contact with them directly.

3. Will the data look the same as it did last season?

No, there will be changes. Previously, RSV data was only collected within the BIS NICU encounter and focused on high-risk eligibility criteria and dose administration. As of this fall, new data elements will be captured in the Antenatal General (AG) encounter, Labour-Birth-Mother (LBM) encounter, Post-partum Child (PPC) encounter, and Neonatal Intensive Care Unit (NICU) encounter.

4. What types of information will BORN be collecting related to RSV?

The expanded data collection will provide insights into trends in prenatal vaccine administration, infant antibody administration, and factors related to infants admitted to NICUs with high-risk factors for RSV.

5. Will we be able to see the impact of collecting this data at our site?

Yes, BORN is developing reports that will include the new RSV data elements. These reports will feature site-specific and level-of-care comparisons, as well as provincial comparisons. Anticipated data points include (but are not limited to):

- Distribution of pregnant individuals who received the prenatal RSV vaccine
- Distribution of infants who received the RSV monoclonal antibody (mAb)
- Distribution of infants admitted to NICUs with RSV high-risk factors
- Reasons for non-administration of infant RSV immunization

Additional reports may be developed based on emerging needs.

6. Is it mandatory to submit RSV data?

A limited amount of infant RSV immunization data will be mandatory. Submission of prenatal RSV vaccine data will be optional. The Ministry of Health and BORN aim to balance comprehensive data collection with minimizing the data entry burden to facilitate easy submission.

7. Can we propose changes to the new RSV data elements?

Yes – critical ones. The data elements as shared are currently being incorporated into the BORN Information System. While the data elements have been developed in consultation with Ministry partners, Public Health Ontario, IC/ES, BORN's Maternal Newborn Outcomes Committee, the Neonatal Working Group, and the BORN's Midwifery Advisory Committee and their feedback has been integrated, it is possible you may find a critical issue. We encourage you to share feedback with us through your Regional Coordinator.

8. How will midwives enter data for the infant RSV immunizations if they are not permitted to administer the doses?

While midwives can prescribe and administer the RSV vaccine, Abrysvo, to pregnant clients, they are not currently authorized to do so for Beyfortus for infants. Midwives will need either a medical directive to administer infant doses or refer clients to other primary care clinicians and clinics until such time as Ontario's midwifery drug regulations are updated.

If administered under a medical directive, midwives should enter the data in the PPC encounter. If the midwife confirms that the infant received Beyfortus from *another* provider before completing their BORN data entry, they should document the date in the PPC encounter. If the midwife is not authorized to provide Beyfortus and there is no known date from another provider, they should select "Midwife not authorized" as the reason.

9. When will we receive technical specifications to share with our technical teams?

We are currently finalizing the technical specifications and plan to distribute them to you by September 20, 2024.

10. Will BORN be releasing any additional information on data collection closer to the date of go-live?

Yes. We will host several 30-minute live webinars, which will also be recorded, to review BORN data and address any questions. Please register for one session:

- Friday, September 20th 12pm
- Tuesday, September 24th 9am
- Thursday, September 26th 4:30pm

11. What should I do if I encounter problems entering our RSV data?

If you experience any issues with data entry, please follow the current protocol for problem-solving; your Regional Coordinator will be happy to assist you.