SNAPSHOTS

Immunization information system news from the American Immunization Registry Association (AIRA)

Welcome to SnapShots, the American Immunization Registry Association's newsletter about the progress, best practices, and accomplishments of immunization information systems across the country. We invite you to share news about your IIS. Email us at aira@immregistries.org or call us at (212) 676-2325 with information about a successful programmatic or technical innovation, major accomplishment, or milestone that your IIS has reached. SnapShots is sent to subscribers quarterly and posted on AIRA's web site: www.immregistries.org.

TABLE OF CONTENTS

President's Report

We are now well into summer and I hope you all have had a chance to take some time off and rest a bit in preparation for the pressures the fall season will surely bring. This is always a busy time for the immunization and IIS communities, with back-to-school immunization needs, urgent record requests from parents, and seasonal flu vaccine preparation. Now we also have the pandemic H1N1 influenza to prepare for along with all its uncertainty. Whew, I am tired already! We definitely have our work cut out for us, but please remember that AIRA will continue to be a source of updated information and resource as we head into this busy season.

Enjoy this issue of SnapShots and have a wonderful summer!

Sherry
Sherry Riddick (WA), AIRA President

Strategy and Methods to Increase Twinrix Vaccinations: An IIS Partnership

Reaching high-risk adult populations for administration of hepatitis A and B vaccinations is a challenging task but the Arizona State Immunization Information System (ASIIS) and Hepatitis programs have had great success with these activities in recent months. The partnership not only managed to control wastage of Twinrix vaccine lots that were coming close to expiration, but also administered vaccinations and completed the electronic data entry at outdoor, public events – with no access to the Internet.

Background - In early April of 2009, Cameron Lewis, the Adult Hepatitis Program Coordinator/ Manager for the Arizona Department of Health Services (AZDHS), was faced with an overstock of Twinrix™ vaccine along with rapidly approaching expiration dates for the Twinrix™ lots. His challenge was to increase outreach efforts to adult populations and at the same time, update the Twinrix™ electronic inventory in ASIIS through immediate data entry of administered vaccinations. Cameron asked the ASIIS Project Leader, Lisa Rasmussen, to assist.

As it turned out, an upcoming event in Phoenix would present an ideal opportunity for access to the primary CDC target populations for Hepatitis risk reduction. The event, "Phoenix Pride," is an annual outdoor festival which attracts 25,000 people and was held over the weekend of April 18 and 19 this year. Phoenix Pride is consistently well-attended and draws adults from not only the major population areas of Phoenix and other cities in Arizona, but other states as well. The decision was made to conduct mass vaccination clinics during both days of the festival in Phoenix.

Contacts were made with HepTeam (Hepteam.org), an outreach organization supporting efforts to reduce hepatitis through proactive vaccination for Hepatitis A and B. HepTeam is funded by a grant from GlaxoSmithKline (GSK). HepTeam agreed to partner with AZDHS to provide the infrastructure for the outreach event, supportive educational content, and representatives at the festival. The HepTeam reps would engage the festival attendees and provide information about hepatitis, risk factors, and the benefits of vaccination. The clinic would be conducted and staffed with vaccinators from the Maricopa County Health Department and Gila County Health Department, and the administrative activities were staffed by AZDHS personnel from the Immunization, HIV, STD, Ryan White/ADAP, Tobacco and WIC programs and a few community volunteers.

With the plan in motion to conduct a Twinrix ™ mass vaccination clinic at the festival, the remaining problems to be solved centered on the clinic environment (all outdoors) and the need to quickly and accurately capture participant date and update the IIS with patient and vaccination data. An objective was to avoid the process where information is captured on-site through paper forms with the IIS data entry completed at a later time in the health unit. Electronic data entry completed during the time the patient was present was favored to maintain data quality and streamline the data input process.

ASIIS provides specialized user interfaces tailored for mass vaccination clinics. These modules are utilized where any high patient flow situations require rapid collection of data elements deemed to be necessary for mass vaccinations rather than the more robust capabilities of the day-

to-day use of the IIS. These two modules, "Mass Immunizations Web" and "Mass Immunizations Standalone" (MI), provide single-screen transactions with 1 to 2 minutes of data entry time per patient. The standalone version of MI is used in a disconnected mode and the entire application, along with data, is self-contained on a USB flash-drive device. The Web version of MI is used in an Internet-connected mode and allows the user to search and update the IIS in real time. The process for use of the standalone version is to collect the data at the outreach or remote clinic site and upload the data to the IIS as soon as network or Internet access is available. Given the outdoor, disconnected environment of the event, it was decided to use the standalone version and upload the data immediately following the event. The advantage over the collection of patient demographics and vaccinations on paper forms is the better quality data and the major reduction in post event paperwork.

Event Details - At the event, Twinrix™ shots were being provided at no cost to the attendees. With ideal weather conditions, a good turnout was expected over the course of the two 5-hour time periods of the weekend festival. Based on this, the county health department provided two vaccinators and ADHS provided three volunteers for data entry staff using laptops and the MI application loaded on a flash-drive for each laptop. The data entry staff worked to collect the data prior to vaccine administration and make any needed corrections while the patient was present before sending the patient for vaccination.

Additionally, the vaccinations were promoted to the attendees through "one on one" or "small group" on the fly patient education sessions provided by the HepTeam personnel. Lines quickly queued up at the three stations and kept all of the county health department staff very busy over the 10 hours of activities. The turnout exceeded expectations.

Results - The vaccinating/data entry teams averaged 62.5 administered shots per hour for a total of 625 vaccinations. Because these were all captured electronically in MI Standalone, transferring the data to the IIS was just a matter of exporting from the flash drives, and importing to the IIS database the following Monday – a few minutes of work rather than hours necessary to do the data entry from paper forms. The use of MI contributed to high data quality.

The Arizona team has demonstrated an effective, repeatable strategy for adult vaccination outreach. Several objectives were met through careful planning, partnering among the Adult Hepatitis Program, ASIIS program, the National HepTeam and a private industry partner, GSK. These cooperative efforts, along with the innovative targeting of a public event and utilization of specialized registry tools, led to a very successful outreach effort. Added to this success was the waste prevention achieved regarding the Twinrix™ inventory coming very close to expiration.

Since the Phoenix Pride event, the same team has repeated the Twinrix™ outreach effort at a gay pride event in Flagstaff, Arizona, and plans to continue these efforts in the early fall with events in Phoenix, Sedona, and Tucson.

Buzz Conn, STC

Online Training: Lessons and Opportunities for State IIS

In a webinar last April, cosponsored by AIRA and California's Immunization Registry (CAIR), three states (Tennessee, South Dakota, and Pennsylvania) shared distance learning technology tools they have developed to train new registry users. Common goals included improving training efficiency and decreasing training-associated travel costs.

South Dakota's training was developed jointly by IIS staff and their state registry vendor, Avanza Systems, Inc. The curriculum walks users through the registry functions. Key features include a live, instructor-led session via phone for small groups and hands-on learning. The personalized approach allows for interaction with and direct feedback from trainees with no travel costs incurred. Challenges include getting forms and handouts must be sent out ahead of time.

Pennsylvania's registry training also was developed by Avanza. Their system is user-directed, standardized, and easy to update as new functionality is added to their IIS. Since implementing their online training in 2008, the PASIIS has reduced both operational costs and "re-trainings" across the state. Challenges include integrating policies and procedures into their training curriculum, obtaining user agreements, and testing the interface on multiple Web browsers.

Tennessee's training was implemented in 2008. It has 16 brief modules, self-paced with voice-over audio narration. The training, programmed with the Camtasia software application, is easy to use and easy to update with video recording software. Challenges include the inability to monitor trainee progress, assess effectiveness, or receive trainee feedback.

The presentations highlighted key differences in how states are approaching online training. Among them:
- Are trainees self-directed or led by an instructor?
- What is the investment of time and resources to develop the training?
- How is online training effectiveness assessed?
- Is it possible to track trainee progress, completion rate, or problems encountered?
- Does the training curriculum vary for different users (e.g., clinical vs. non-clinical)?
- Can trainees pick and choose which topics to learn?
- How user-friendly is the training and was it tested with target audiences?
- How easy (or costly) is it to update the training if the registry application is upgraded?
- Do trainees receive a verification of training completed?

Audience questions and comments following the webinar suggest that this is a provocative and timely topic. As a result, AIRA is exploring ways to foster information sharing so states can continue to learn from each other.

Pleased stay tuned! In the coming months, AIRA will survey all registries with the goal of leaning about their experiences with (or plans for) using online training. The survey results will help us build a knowledge repository of online training models and innovations. Future efforts may also include developing AIRA guidelines on the core elements needed to implement an

effective online training program. To get involved or learn more, contact Ina Kichen at ikichen@health.nyc.gov or Tammy Pilisuk at Tammy.Pilisuk@cdph.ca.gov. Use the following link to access the audio and video recording of the online training webinar. https://cc.readytalk.com/play?id=082n18f6

Tammy Pilisuk, CA

Vaccine Tracking System (VTrckS) Grantee Advisory Committee (GAC) Update

A total of nine workgroups exist through the GAC focusing on these areas of VTrckS: 1) External Information System (ExIS) messaging and interface, 2) Contact center 3) Provider and grantee ordering, 4) Reports, 5) Support documentation, 6) Data conversion, 7) User testing, 8) Change management and 9) Users group and evaluation. The ExIS and Contact center workgroups have been meeting for several months while the other seven have been newly formed.

Each of the seven new workgroups has a CDC contact as the primary lead as well as a lead from the GAC. The primary task of these workgroups is to review and provide feedback on the plans that have been developed for Release 1. These groups are providing important input and are helping to shape the final look of VTrckS. Grantees are strongly encouraged to become involved in any workgroup in which they have an interest. Please contact Nathan Crawford, CDC's GAC lead, at 404.639.8242 or ncrawford2@cdc.gov if you have questions about these workgroups or would like to become involved.

Nathan Crawford, CDC

ExIS Workgroup Update

The Vaccine Tracking System (VTrckS) is one of eleven work streams under CDC's Vaccine Management Business Improvement Project (VMBIP). When fully developed, VTrckS will be a fully functional on-line ordering system that supports centralized distribution.

A VTrckS Grantee Advisory Committee (GAC) External Information System (ExIS) workgroup was formed to ensure that ExIS have a defined functional and technical messaging specifications document that is supported by the original requirements for data exchange between ExIS and VTrckS. An ExIS includes immunization information systems as well as other grantee-specific vaccine ordering systems.

The ExIS workgroup's scope was to provide input and consultation on the development of messages and record sets required for batch data transfer to and from VTrckS using flat file type formats. However, the workgroup expressed the need for a tiered communication approach, which would allow for real-time or near real-time data exchange in future VTrckS releases.

Grantees and other stakeholders, including vendors, were solicited to participate in this workgroup. There was an overwhelming response from grantees wanting to participate and the first ExIS messaging and interface workgroup call was held on May 14, 2009. There were 15

grantees and 3 vendors on our first call. Additional grantees have joined since our initial call and participation continued to be open to anyone who desired to participate.

The GAC anticipates the ExIS final document to be completed and presented to them by the end of July 2009. After Committee review and approval, the ExIS messaging and interface document will be disseminated broadly for further comments.

Janet Kelly, CDC

Latest MIROW Best Practice Documents Now Available

The Modeling of Immunization Registry Operations Workgroup (MIROW) Steering Committee has been very busy the past six months completing Chapter 4 in the series of MIROW best practice guidelines and two new mini-guides. Chapter 4, titled *Reminder/Recall in Immunization Information Systems,* was distributed at the 2009 NIC as were mini-guides for Chapter 2, *Vaccine Level Deduplication in IIS,* and Chapter 3, *Data Quality Assurance in IIS, Incoming Data.*

All the MIROW documents and associated mini-guides are online on the AIRA web site. http://www.immregistries.org/pubs/mirow.phtml

CDC Recommendations on Use of PPSV23 During H1N1 Outbreak

On July 9, CDC issued recommendations for the use of 23-valent pneumococcal polysaccharide vaccine (PPSV23) during a novel influenza A (H1N1) outbreak. This recommendation provided interim guidance on which groups should receive the pneumococcal vaccine. In short, the Advisory Committee on Immunization Practices (ACIP) recommends a single dose of PPSV23 for all people 65 years of age and older and for people 2 to 64 years of age with certain high-risk conditions. Please take time to read the entire CDC recommendation at http://www.cdc.gov/h1n1flu/guidance/ppsv_h1n1.htm.

Planning for the Southeast Regional Forum

AIRA has already started planning for the latest in the series of regional forums. The next forum will be held for IIS projects in the Southeast region and will take place in New Orleans at the beginning of November. States included in this forum are Alabama, Arkansas, Florida, Georgia, Louisiana, Mississippi, North Carolina, South Carolina and Tennessee. The format for this forum will be similar to the two previous regional forums, Northeast and Midwest, and include presentations, panel discussions, and development of an action plan involving all the participants. The Southeast Regional Forum is shaping up nicely and is expected to be another successful opportunity for IIS professionals to meet face-to-face with their colleagues in neighboring states.

Upcoming AIRA Education Activities

Be on the lookout for information on the following education activities coming your way in the next few months.
- ✓ Webinar on IIS Research and Publishing – September TBD
- ✓ Survey on IIS online training best practices and lessons learned
- ✓ Publication of MIROW Chapter 4 mini-guide on reminder/recall in IIS

And, make sure to regularly check in at AIRA's pandemic influenza Web page for new links and documents on pandemic influenza preparedness.
http://www.immregistries.org/news/INFLUENZA_INFO.phtml

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