SNAPSHOTS

Immunization registry 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 registry. 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 registry has reached. SnapShots is sent to subscribers quarterly and posted on AIRA's web site: www.immregistries.org.

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President's Report

AIRA just completed its first online election and AIRA members selected a new President, President-Elect and seven Board members. Congratulations to them all. Please read the following article for all the details.

This will be my final President's column in SnapShots now that I am AIRA's Past President. If I could impart one last message it would be to encourage everyone to use the data in your IIS. As I traveled

across the country presenting for AIRA I saw so many IIS success stories at each location. Even though every patient record in your IIS may not be a complete immunization record there is enough data to demonstrate how important it is to consolidate immunization records. The ability to identify pockets of need where low vaccinations exist within a jurisdiction is very important even if some of the low immunization rates are due to under reporting. There is no better way to encourage participation in the IIS then to share results locally. I have never met a health clinic that wants to have low immunization rates.

Share your success stories! We want everyone to take notice of Immunization Information Systems, including the health information exchanges that are starting up around the country. We need to share our success stories with CDC so they may be used when requesting additional funding at the federal level.

I am looking forward to serving the next two years as Past President, and I welcome Sherry Riddick as AIRA's new President. Thank you to Cindy, Ina and Angie for keeping me organized and updated on all the activities of AIRA. Thanks to all of you for allowing me to serve as President of AIRA for the past two years.

Submitted by Therese Hoyle (MI), AIRA President

New AIRA Board Officials Elected in Online Ballot

In past years, AIRA conducted its elections for open Board positions at its Annual Meeting held at the Immunization Registry Conference (IRC). Since the IRC is no longer convened, AIRA decided to hold online elections. Working with our web programmer, we developed and implemented our first online voting process. This would not only allow all AIRA members to vote, regardless of where they were located, but also made the voting process easy, more secure and anonymous. The result was that we had a record number of AIRA members voting – 62%. There were also a record number of candidates, illustrating the increased participation of the AIRA volunteer membership.

AIRA is very proud to announce the following newly elected Board members. All have proven themselves to be committed to the progress of IIS, the support of IIS staff, and the mission and goals of AIRA. They have all worked hard on many AIRA initiatives and lent their extensive experience and knowledge whenever called upon to do so. They will assume their new positions on the Board as of November 1, 2007, joining current Board members Amy Metroka, Julie Boom and Therese Hoyle.

President – Sherry Riddick, Washington CHILD Profile Immunization Registry

President-Elect – Anne Cordon, San Diego Regional Immunization Registry

Members of the Board of Directors

- Bridget Ahrens, Vermont
- Shawn Box, Maine
- Anna Dragsbaek, Houston/Harris County
- Emily Peterson-Stauffer, Minnesota
- Mark Sawyer, San Diego

Ex-Officio Members (non-voting positions)

- Sue Salkowitz, Salkowitz Associates
- Rob Savage, EDS

AIRA also wants to thank the following outgoing Board members: Katie Reed, Elaine Lowery, Bill Brand, and Pat Deyo. They have served AIRA well and contributed so much to the IIS community in the past. We know they will continue to do so in the future.

Dave Ross Named as New CCHIT Commissioner

Dave Ross, Director of the Public Health Informatics Institute (PHII), a long-time AIRA partner, has been appointed as one of three new commissioners to serve on the Certification Commission for Healthcare Information Technology (CCHIT). Dave was selected, along with two other new commissioners, from a pool of 35 applicants. His selection was approved unanimously by the CCHIT Trustees.

AIRA congratulates Dave. We know that his expertise will prove invaluable in work of CCHIT to develop certification criteria and a program to certify health information technology products and networks.

Big Aspirations: Evolving IIS to Become a Platform for Emergency Response

Recently the State of Washington Department of Health (DOH) initiated an effort to analyze local health and State administrative staff requirements related to mass immunization/countermeasure distribution efforts. The primary purpose was to determine best practices for gathering mass immunization data, and evaluate how alternative technologies (such as bar coding) can be integrated with the CHILD Profile Immunization Registry (CPIR) and associated modules to speed data collection, improve data quality, and support decision management in an emergency event. Recommendations from the assessment included:

- Enhancing CPIR bar code functionality;
- Enhancing CPIR inventory management functions to include support for SNS inventory tracking and distribution;
- Enhancing the CPIR Mass Immunizations Module (MI) interface for increased usability and expanded application; and
- Increasing the use of GIS technologies for planning and evaluating response efforts.

Recommended bar coding enhancements include incorporating the ability to scan drivers licenses 2-D bar codes to expedite patient searches and populate demographic data fields such as name, birth date and address. CPIR currently includes functionality for producing 1-D bar codes generated from the SIIS ID that can be printed onto patient records and reminder notices. These bar codes can then be scanned when the patient presents for service, and the patient's record will automatically be pulled up by CPIR. Building on the current 1-D bar coding functionality, an additional enhancement is being considered for use with inventory information. The proposed functionality would allow CPIR to generate 1-D bar codes from inventory in the system that could be printed on a "scan sheet" or printed on labels that could be applied to the patient's paper record. When the inventory bar code is scanned in conjunction with a selected patient, the vaccine would automatically populate related fields for the administered vaccination (manufacturer, lot number, expiration date, etc.).

Suggested SNS enhancements would support the electronic import of inventory information supplied by CDC. This would include the import of inventory files supplied either by CD included with the push pack or exported by the CDC's Reception, Storage, Staging and Inventory Tracking System (RITS). CPIR could then be used to track distribution and utilization of the SNS inventories supported through the use of orders/transfers, reconciliation, pills-to-patients tracking, and numerous inventory and utilization reports. CPIR could also facilitate reallocation as needed and the recovery of unused inventory post-event.

Other recommended enhancements to CPIR MI included maximizing the use of drop downs and pre-populated fields, expanding the availability of data elements that can be collected depending on the response situation and better accommodating the need for post-event data entry. Increased use of GIS

technologies included the ability to visually display POD locations and related alternate care facilities, distribution of population for a particular POD, and mapping of coverage rates and adverse events.

Through implementation of these and other tools, CPIR would evolve beyond current Immunization Management System (IMS) functionality to become a critical tool for emergency event response activities with a countermeasure component. Discussions related to CPIR enhancements also provide opportunities for stakeholders (BT, SNS, RSS and Immunization) to come together and ensure the best possible solution to meet emergency response needs for the State of Washington.

Note: This analysis was conducted by Scientific Technologies Corporation (STC) who was selected by WA DOH through a competitive contracting process.

Submitted by Ellen Gish, WA

A Brief Update from MIROW: Validation Experts meet in Atlanta

Subject matter experts from various perspectives who work with Immunization Information Systems met in Atlanta August 21-23, 2007 to develop data quality validations, checks and rules.

The meeting and associated follow up is part of the next chapter produced by the Modeling of Immunization Registry Operations Workgroup (MIROW). The goal of this current workgroup is to produce a guideline on the data quality validation or data checks for use in the IIS. The face to face meeting resulted in the creation of a variety of business rules, process considerations-such as pre certification data load verification, terms and definitions and other general recommendations and principles. The group hopes to finish the guidelines this fall and send the work out for external review. Please stay tuned.

For more information on the previous work done by the MIROW effort, please visit the AIRA web site at: http://www.immregistries.org/pubs/mirow.phtml.

Submitted by Warren Williams, CDC/NCIRD and Elaine Lowery, CO

AIRA Responds to ONC Prototype Use Cases

AIRA had an opportunity to directly engage in the national HIT initiatives and assert the organization as a Subject Matter Expert in the immunization information system domain following this announcement early in the year:

> *In January 2007, the American Health Information Community (AHIC) approved a recommendation to develop a use case that* **addresses certain aspects of immunizations and response management.** *AHIC is a federally-chartered advisory committee and provides input and recommendations to the Department of Health and Human Services (HHS) on how to make health records digital and interoperable, and assure that the privacy and security of those records are protected, in a smooth, market-led way.*

The 2008 use cases are being developed by the Office of the National Coordinator for Health Information Technology (ONC) with opportunities for review and feedback by interested stakeholders within both the private and public sectors. These will be developed in two phases, a prototype high level use case, and a detailed use case documenting all of the events and actions, each with a round of public comment. AIRA's response was to the Prototype Use case, a high level description of the workflow to set the stage for a Detailed Use Case which will be developed using this input and will generate a second round of public input.

Members of the AIRA DES Committee led the AIRA community in fleshing out the workflow and adding important detail to the prototype as well as identifying additional stakeholders. AIRA contributors to the response document included Rob Savage, Alean Kirnak, and Noam Arzt and Warren Williams of the CDC. The final document was compiled by Sue Salkowitz and was sent by AIRA to the ONC on September 23. CDC, and PHDSC, to which AIRA belongs, also sent responses to these use cases as a means to ensure that public health voices are heard.

ONC indicates that *the feedback received will be reviewed and dispositioned as the Immunizations & Response Management Draft Detailed Use Case is developed. A second round of public feedback will occur following the publication of the draft detailed use case.*

AIRA will be watching for the second round and will vigorously respond. AIRA, through its membership with PHDSC, has also contributed to the formation of the Public Health Informatics Task Force, written major sections of a Public Health Integrated Health Enterprise (IHE) Concept White Paper and has submitted an immunization use case to the IHE which has been accepted.

Submitted by Sue Salkowitz, Salkowitz Associates

ECBT Partners with National Organizations to Further Participation in IIS

Every Child By Two (ECBT) has been conducting a number of initiatives to inform potential users about the benefits of immunization information systems (IIS). Because the goal of each of our outreach programs is to increase the number of providers utilizing your local/state IIS we hope that you will contact us if you have any questions, comments or suggestions as we move forward.

Some of the organizations that we have been partnering with in our outreach efforts are the **National Association of Child Care Professions (NACCP)**, the **American Association of School Administrators (AASA)**, the **American College of Obstetricians and Gynecologist (ACOG)**, and the

American Academy of Family Physicians (AAFP). Our 2007 planned objectives with AAFP are nearing completion.

ECBT and AAFP are in the midst of conducting a Chapter Lecture Series at twelve AAFP chapter meetings to educate members about the newest immunization recommendations, timely immunization strategies, and the benefits of IIS. AAFP attained an expert to present at each lecture and ECBT invited local IIS staff to demonstrate the registry and provide information about how to enroll on the local/state registry.

The lectures were scheduled in the following states, Alabama, Iowa, Maryland, Massachusetts, Delaware, Missouri, Alaska, Indiana, Wisconsin, Nevada (Nov., 2007), North Dakota (Nov., 2007) and Arizona (Feb. 2008). Thus far feedback from each of the chapter lectures has been rated at 4.5 or higher out of a scale of 0 – 5. Physicians have reported that the relevancy of the lectures to their practices is outstanding.

ECBT is currently collaborating with the AAFP on the creation of a four-page continuing medical education (CME) Bulletin titled *Using an Immunization Registry to Improve Vaccination Rates.* After reading this Bulletin, family physicians should be able to: identify and apply one intervention designed to enhance immunization coverage in their practice and, identify benefits and barriers to utilizing an immunization registry to reduce the disparities in vaccination rates. The Bulletin will recognize both ECBT and Wyeth Vaccines. The content includes several references of studies conducted by AIRA and the CDC and directs members to both websites for more information. The draft has been completed and the final version will be mailed out in November 2007 to 69,500 AAFP members – both active and residents – and the Academy will promote the availability of the bulletin to their members through various channels, including their newsletter (print/email), products/services (email), and on-hold messaging. This Bulletin will be posted on the AAFP website for online CME for two years.

Please take a moment to visit ECBT's new website which hosts a detailed section for parents, providers and advocates. The website address is http://www.ecbt.org. **Again, if you have any questions or comments please contact us at info@ecbt.org or call us at 202-783-7034.**

Submitted by Amy Pisani, ECBT

IIS Data Query Tool to Be Launched

CDC/NCIRD will be launching its new "IIS Data Interactive Query Tool" in November 2007. The searchable database will contain detailed calendar year 2004-2006 Immunization Information System Annual Report (IISAR) data.

The IISAR is a survey of IIS activities in 50 states, five cities, and the District of Columbia. It contains information on the number of children aged <6 years participating in the IIS, the number of healthcare provider sites participating in the IIS, and other program and technical capabilities (e.g., data linkages with other health information systems and public health programs, IIS data use, vaccine management, and reporting functions).

An announcement will be sent out when the website is available. For more information contact Bobby Rasulnia at bba9@cdc.gov.

Submitted by Bobby Rasulnia, CDC/CCID/NCIRD

2008-2012 Immunization Program Operations Manual (IPOM) Supports IIS Sustainability

The use of Immunization Information Systems (IIS) in immunization program activities is emphasized in the 2008-2012 Immunization Program Operations Manual (IPOM). The recently revised version of the 2003 document provides increased support to IIS by both recommending and requiring IIS measures to be incorporated into immunization programs. The previous version did not highlight IIS data use throughout each of the program components. The current version of the IPOM, however, mentions IIS in every chapter and outlines specific IIS related activities.

The following web link http://www.cdc.gov/vaccines/programs/iis/states-territories.htm#activity a consolidated table of IIS-related IPOM required and recommended activities. The table is intended as an aid for grantees in benchmarking future IIS program planning and enhancements activities.

Based on the new 2008-2012 IPOM, CDC will be working to develop IIS-specific IPOM performance measures in the coming years. The development of specific grantee IIS performance measures will assist CDC in assessing grantee IIS implementation, operations, and expansion into other immunization program components. Both grantee and stakeholder participation in the process will be vital to the development of an evaluation framework that will ensure IIS activities are specific, measurable, achievable, relevant, and time-bound.

To view the 2008-2012 IPOM, logon to http://www.cdc.gov/vaccines/vac-gen/policies/ipom/default.htm. The document can be viewed in its entirety or chapter by chapter.

Submitted by Julie Clark, MCIR (MI) and Bobby Rasulnia, CDC/CCID/NCIRD

2008 NIC Planning is On Track

The planning for the National Immunization Conference (NIC), to be held March 17-20, 2008, in Atlanta Georgia, is well underway. Angela Salazar has been identified as the track coordinator for Immunization Information Systems. A draft agenda is available on the NIC website at http://cdc.confex.com/cdc/nic2008/techprogram/MEETING.HTM). The deadline for abstract submission is November 15. That direct link is http://www.cdc.gov/vaccines/events/nic/#abstracts .Early bird registration ends on January 25, 2008. Ad hoc meeting requests must be submitted by February 1, 2008.

For more information, please contact the conference planning team at NIPNIC@cdc.gov or contact Angela Salazar directly at aos9@cdc.gov.

WANTED: Your IIS Best Practices!

AIRA wants to highlight your Best Practices on the AIRA web site! This could be your opportunity to share a best practice or successful strategy that you have worked hard to develop and implement at your site. Even those lessons learned have great value to the IIS community. One of AIRA's most important missions is to build a true community of practice for IIS. Highlighting best practices is a key to that.

Share what you effectively done to realize improvement in the areas of data quality, funding, provider relations, data use, integration, technical capacity, or privacy. Let AIRA help you celebrate your achievement by publishing it on the AIRA website. Visit the following link to find out about submitting

your best practice: http://www.immregistries.org/know/best_practices.phtml. For questions or additional information, please contact Ina Kichen at ikichen@immregistries.org.

New IIS-Related Publications

- "Influenza Vaccination Coverage Among Children Aged 6-59 Months – Six Immunization Information System Sentinel Sites, United States, 2006-07 Influenza Season" Source: MMWR, September 21, 2007 / 56(37);963-965

- The Success of an Immunization Information System in the Wake of Hurricane Katrina. Boom JA, Dragsbaek AC, Nelson CS. Pediatrics, Jun 2007; 119:1213-1217

- Meningococcal conjugate vaccine uptake, measured by Michigan's immunization registry. Enger KS, Stokley S. J Adolesc Health. J Adolesc Health. 2007 May;40(5):398-404. Epub 2007 Mar 9.

- Improving pediatric immunization rates in a safety-net delivery system. Melinkovich P, Hammer A, Staudenmaier A, Berg M. Jt Comm J Qual Patient Daf. 2007 Apr;33(4):205-10. PMID: 17441558

- Influenza vaccine vacerage and missed opportunities among inner-city children aged 6-23 months: 2000-2005. Verani JR, Irigoyen M, Chen S, Chimkin F. Pediatrics. 2007 Mar; 119(3):e580-6. PMID: 17332178

- Immunization Information Systems National Research and Evaluation Agenda. Kelly JS, Zimmerman LA, Reed K, Enger KS. J Public Health Management Practice, 2007, 13(1), 35-38.

- Cost savings associated with using immunization information systems for Vaccines for Children administrative tasks. Bartlett DL, Washington ML, Thurston N, Bryant A, Perfili CA. J Public Health Management Practice (in press).

- Meningococcal conjugate vaccine uptake, measured by Michigan's immunization registry. Enger K and Stokley S. Journal of Adolescent Health (in press).

- Immunization Information Systems Use During a Public Health Emergency in the United States. Urquhart GA, Williams W, Tobias J, Welch FJ. Immunization Information Systems Use During a Public Health Emergency in the United States. J Public Health Management Practice, 200713(5), 481-485

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