



# CULTIVATING COMMUNITY ESTABLISHING STANDARDS SUPPORTING IMPLEMENTATION



National Meeting  
**SEATTLE, WA**  
APRIL 5-7 **2016**



# IGNITE

## #AIRA2016

Jane Zucker

# Top Ten Reasons to Invest in Immunization Program-IIS Integration or Why I Love My IIS

Jane R. Zucker, MD, MSc

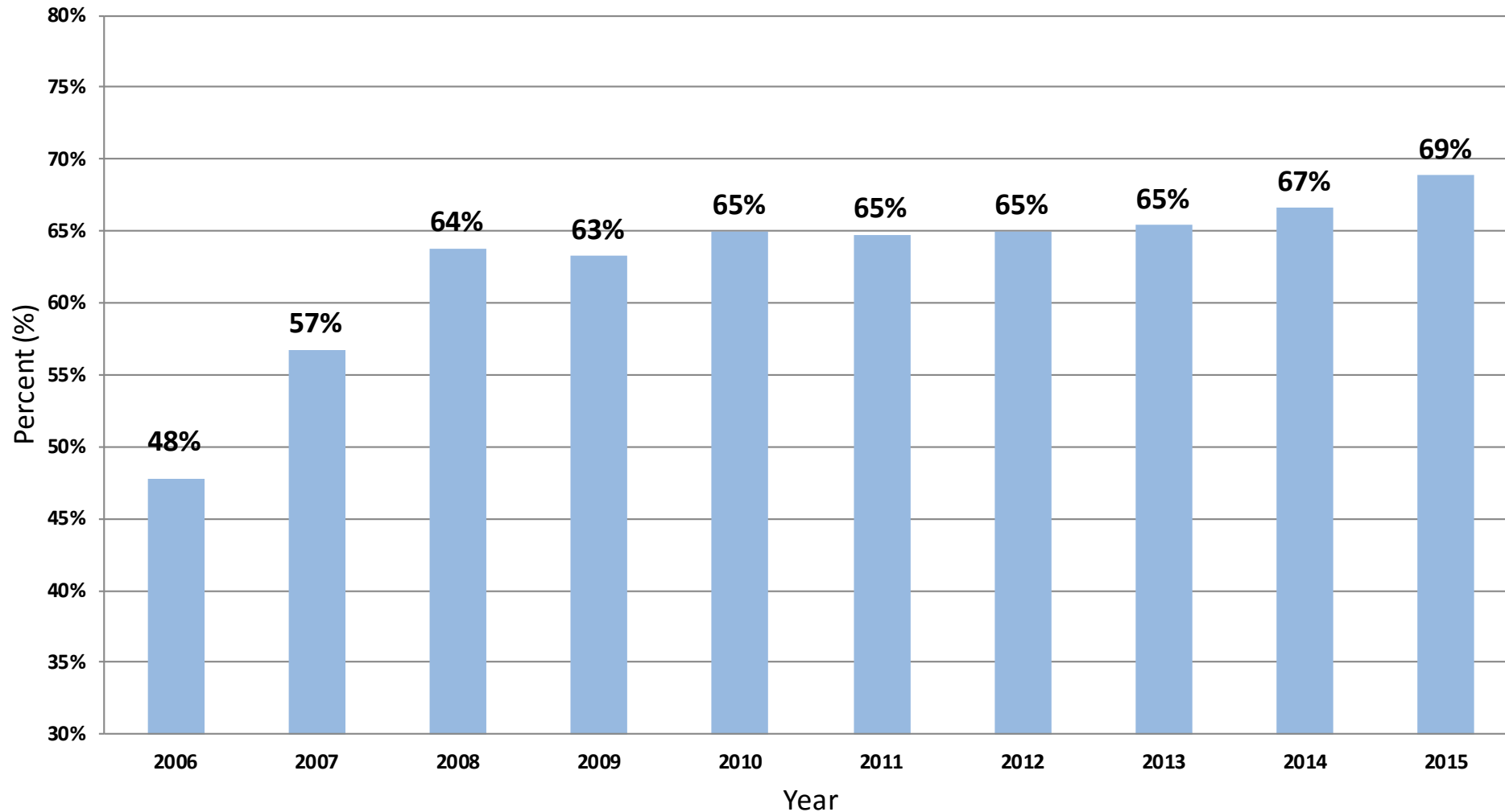
Assistant Commissioner

Bureau of Immunization

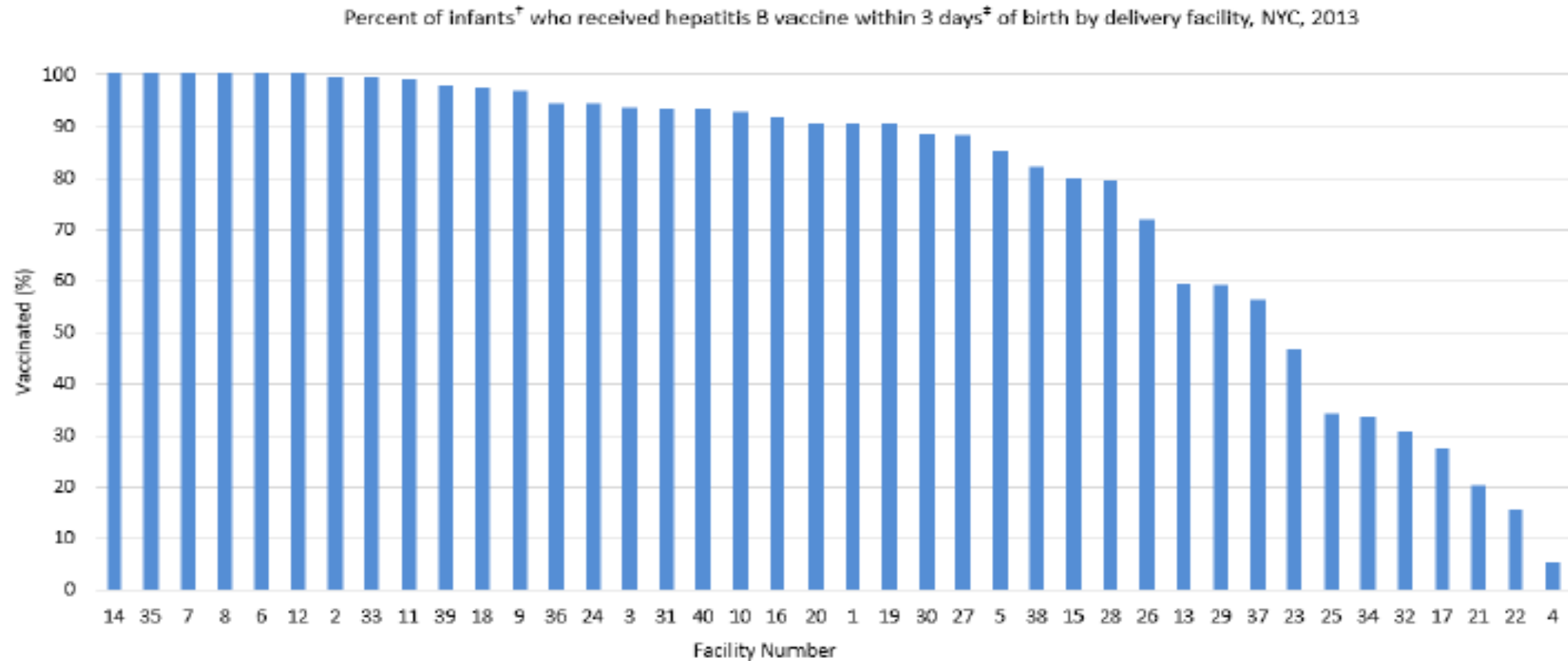
New York City Department of Health and Mental Hygiene

AIRA Ignite, April 7, 2016

# #10a - Allows Tracking of Programs: Changes in Hepatitis B Birth Dose Coverage, 2006-2015



# #10b - Allows Tracking of Programs: Birth Dose Coverage by Hospital, 2013

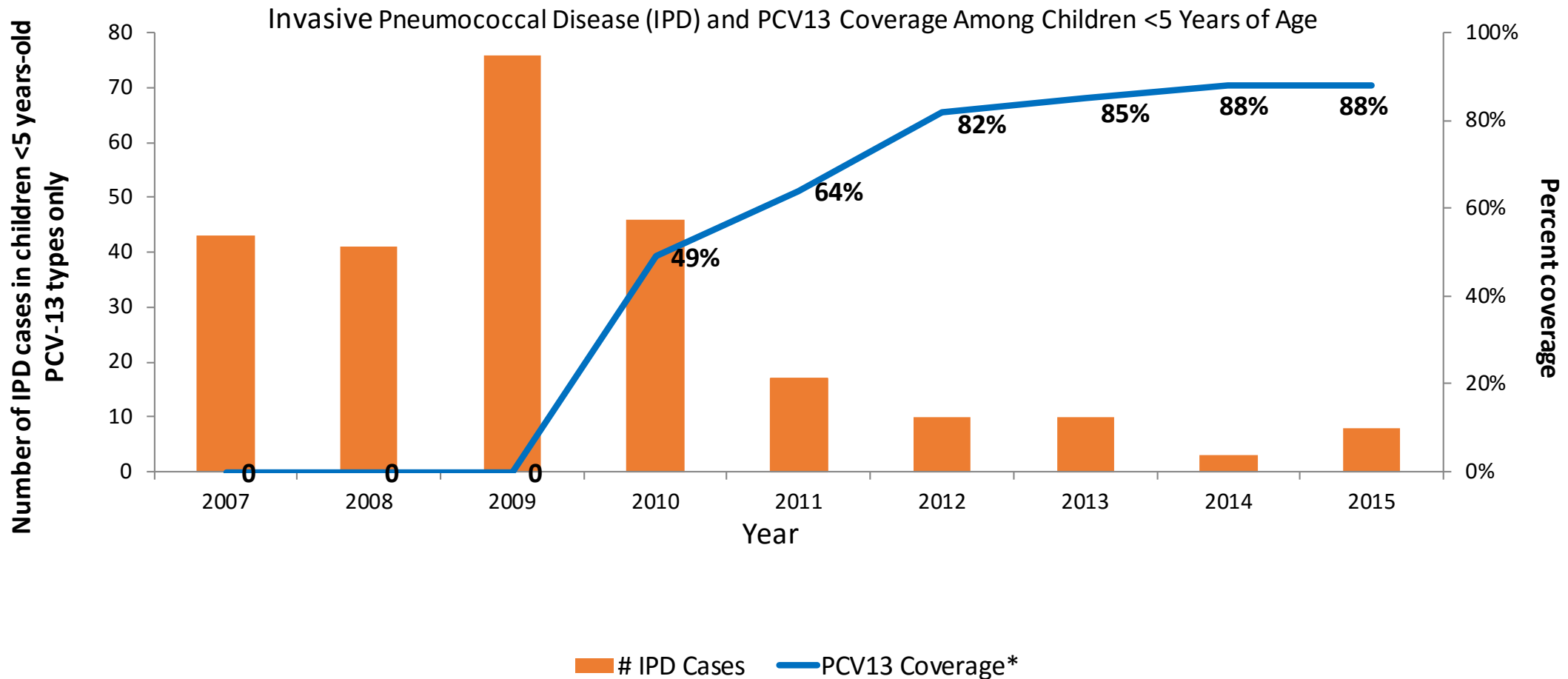


<sup>†</sup> Numerator includes infants who received hepatitis B vaccination regardless of birth weight;

Denominator includes infants with birth weight >2,000 grams born in a NYC delivery facility (Source: NYC DOHMH Office of Vital Statistics)

<sup>‡</sup> Includes hepatitis B vaccination given on days 0 (birth), day 1, day 2 and day 3 to infants regardless of birth weight (Source: NYC Citywide Immunization Registry)

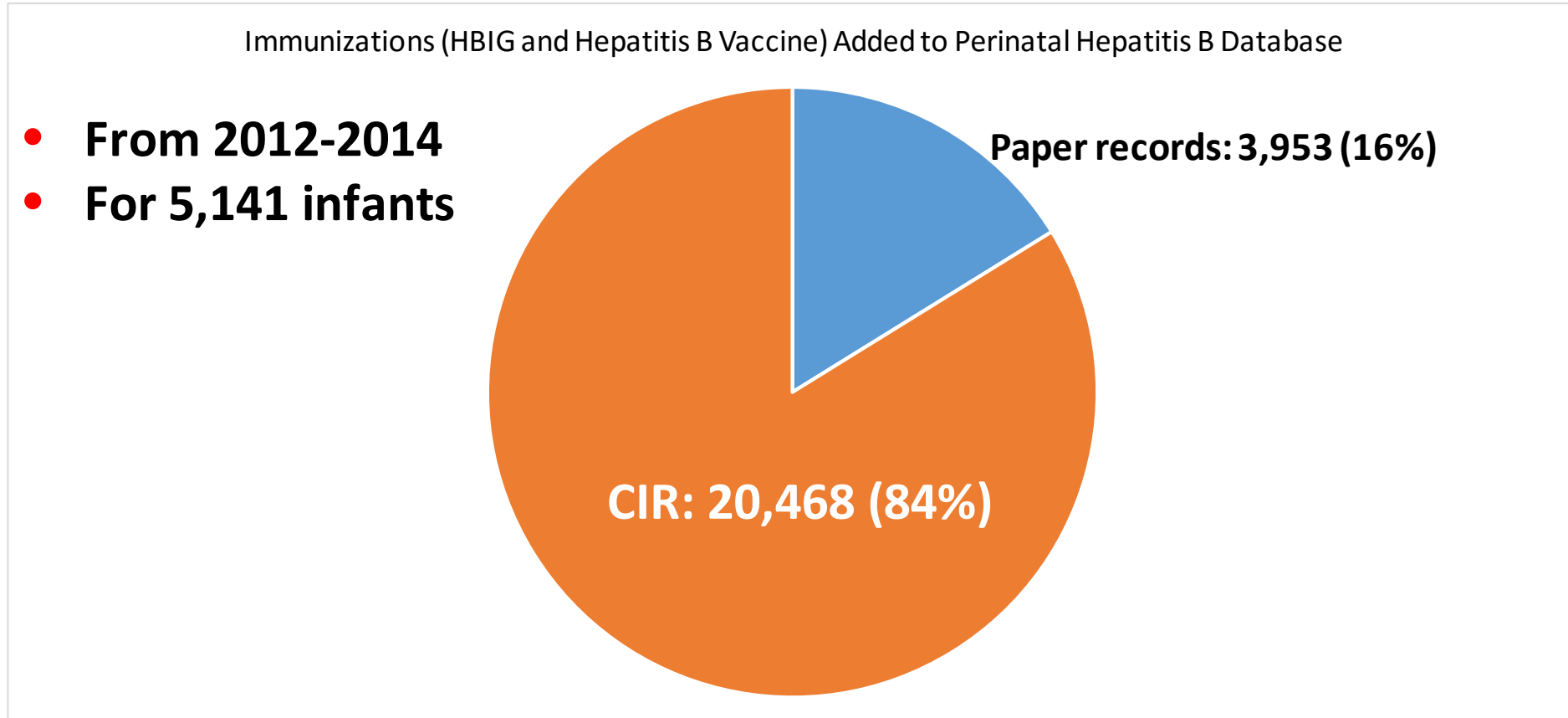
# #9 – Assessment of Program Impact: Decline in IPD with PCV 13 Vaccination



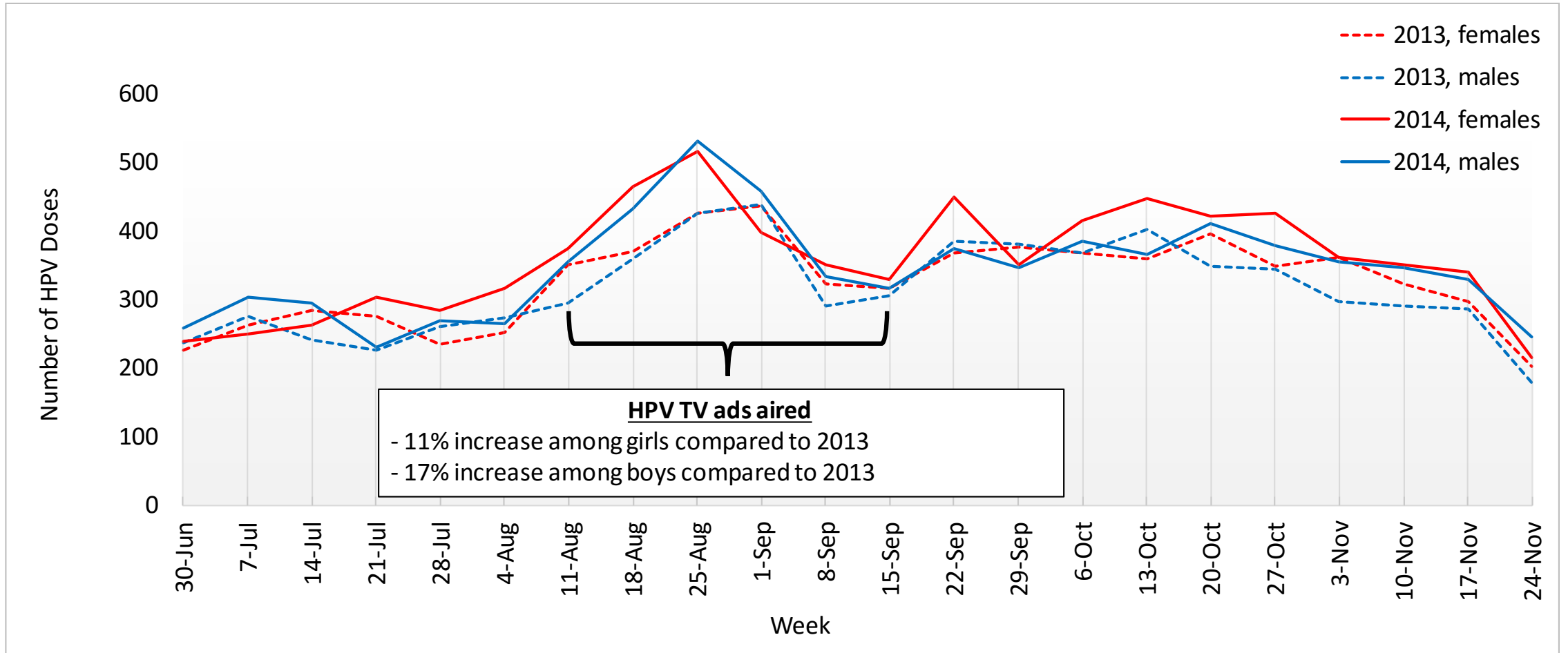
## #8a – Improve the Efficiency of Programs: Immunizations added to Surveillance Databases

2012-2014	Surveillance	Perinatal Hepatitis B Prevention	Total
Number of Immunization Doses Added from CIR	10,480	20,468	30,948

## #8b – Improve the Efficiency of Programs: 84% of Perinatal Hepatitis B Data Comes from CIR

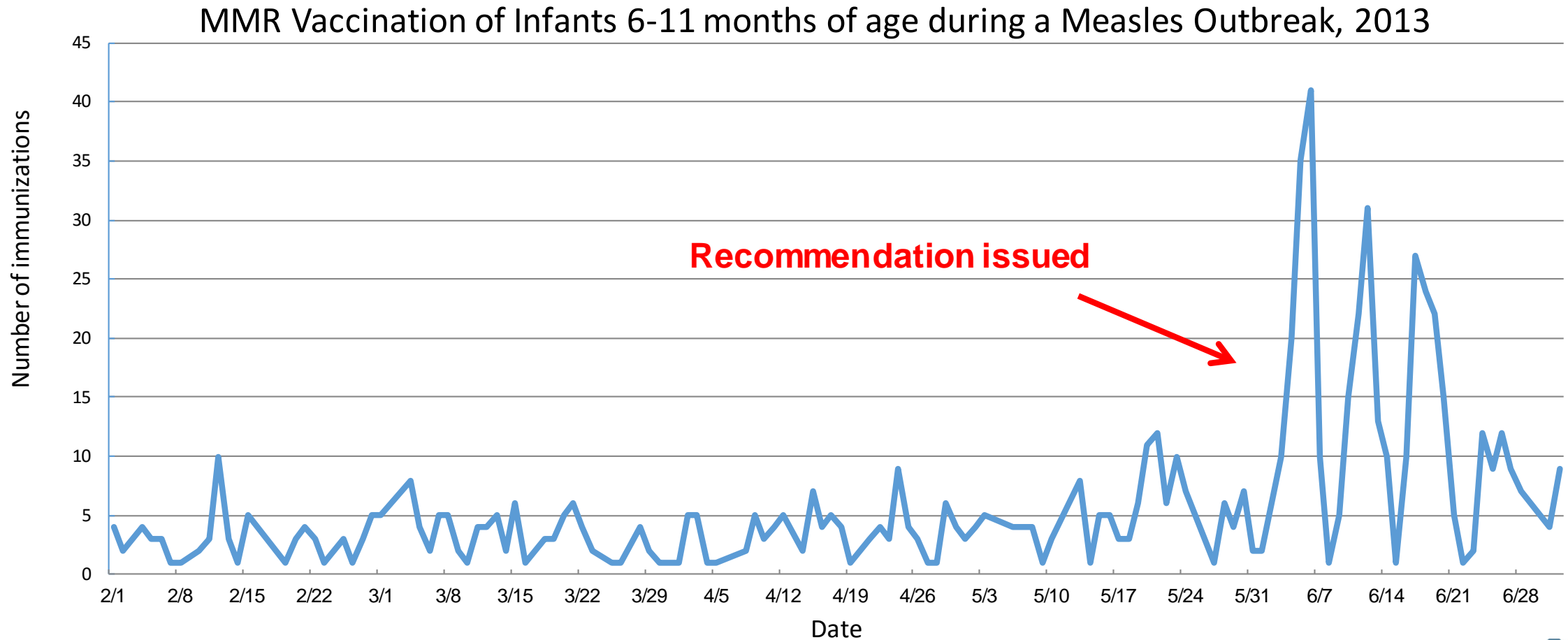


# #7 – Evaluate Effectiveness of Citywide Campaigns: Impact of Fall 2014 HPV Communication Campaign

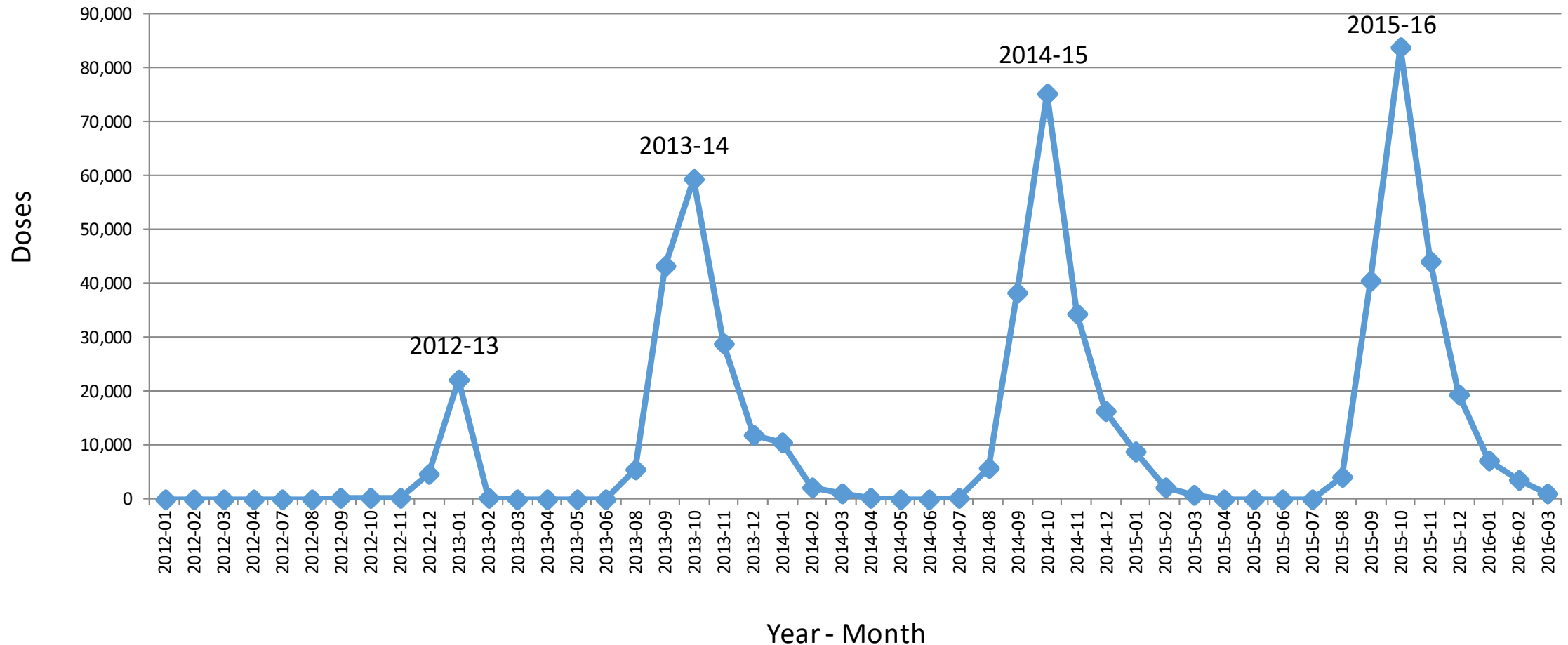




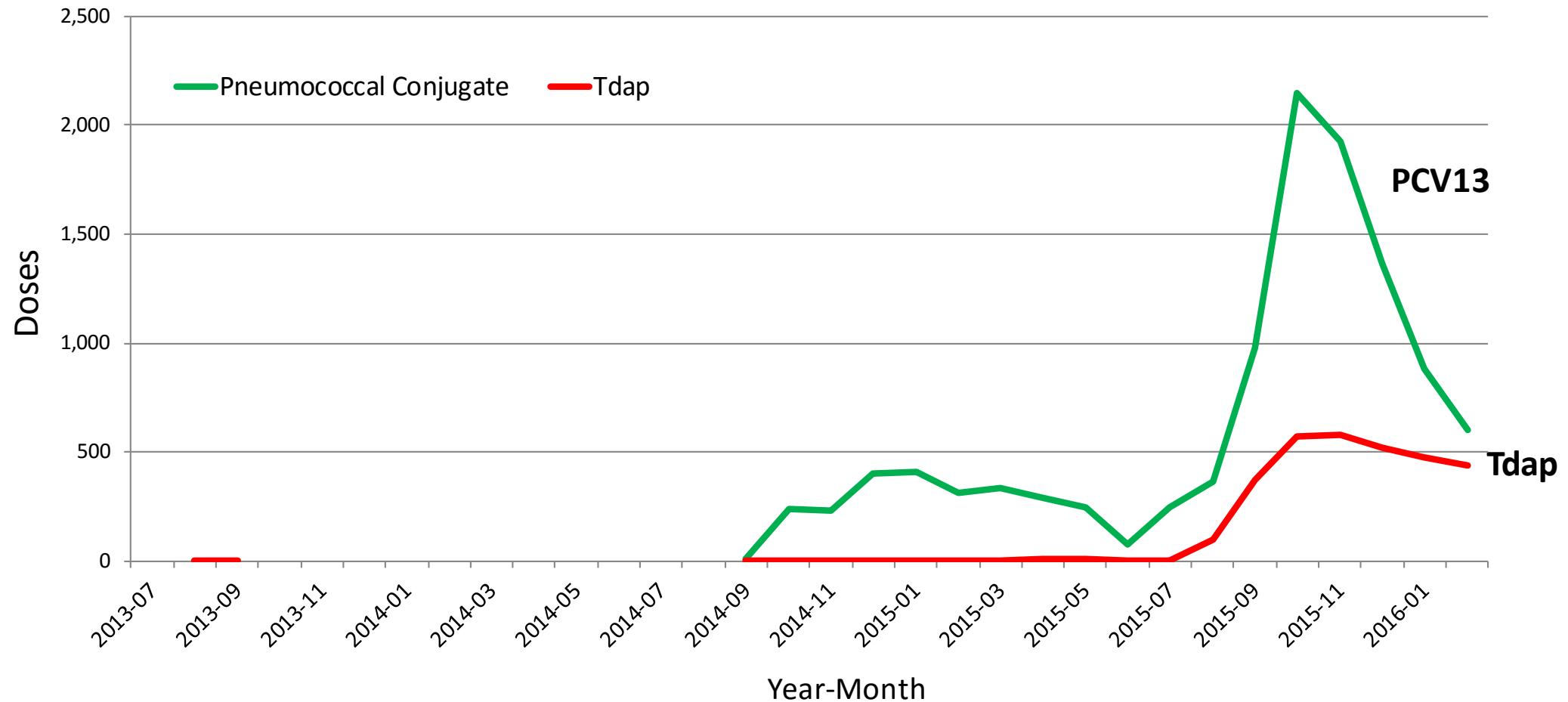
# #6 - Do Providers Follow Health Department Recommendations?



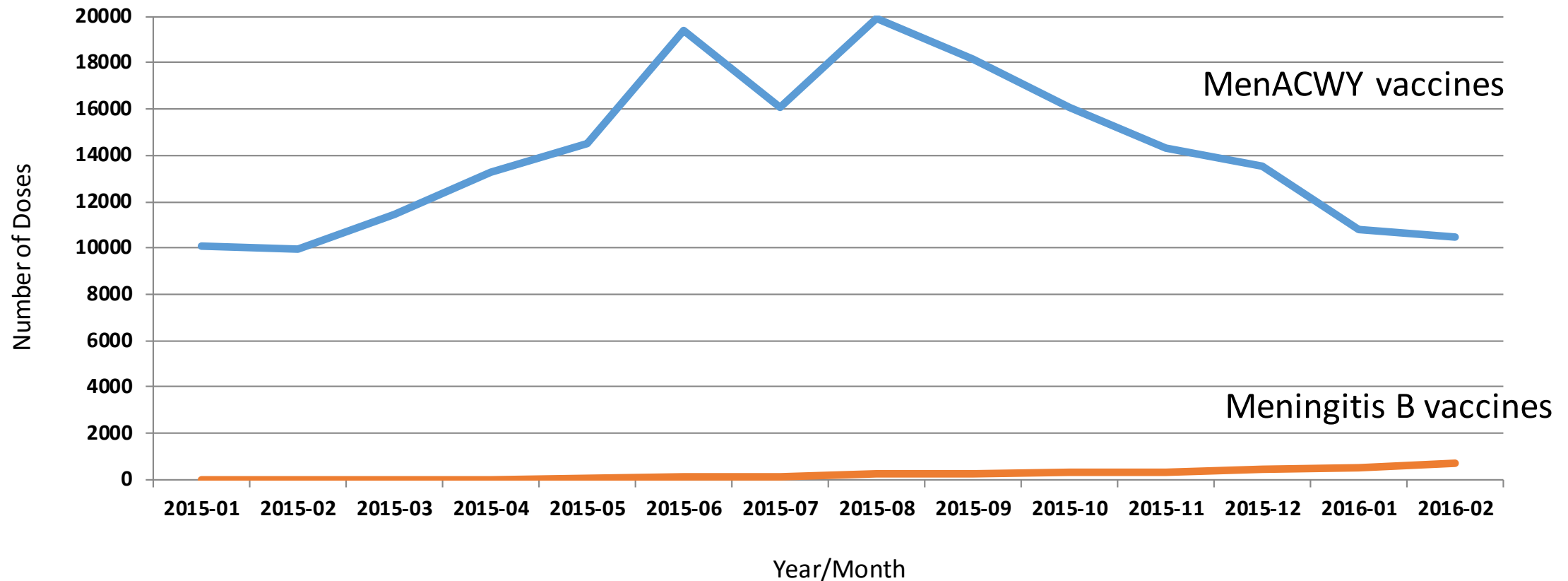
# #5a - Impact of New Legislation: Pharmacy Reporting of Adult Influenza Vaccines



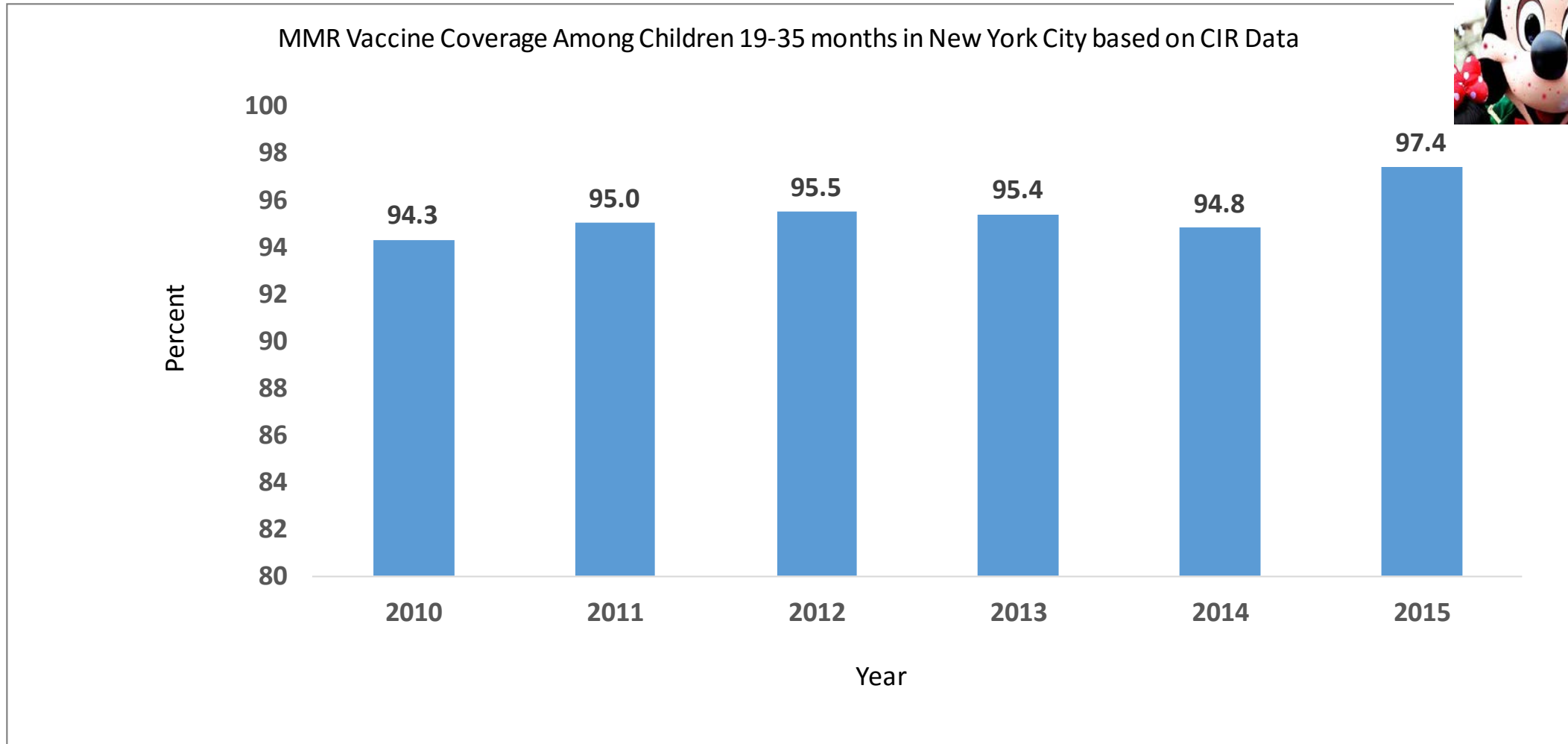
# #5b - Impact of New Legislation: Pharmacy Reporting of Tdap and PCV13



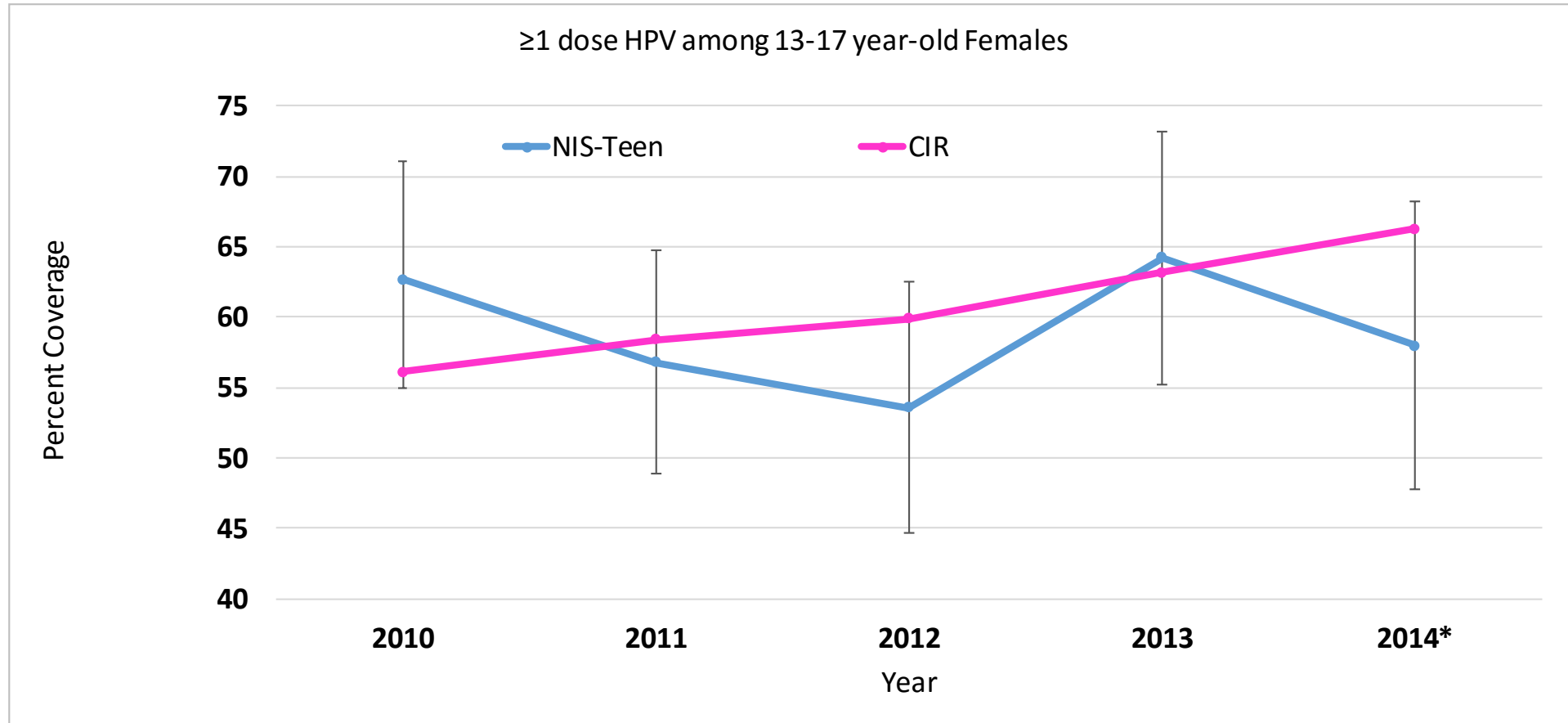
## #4 – Monitor Uptake of Vaccines: Reporting of Meningitis B and ACWY Vaccines



## #4b – Monitor Uptake of Vaccines: Trends in MMR Vaccine Coverage



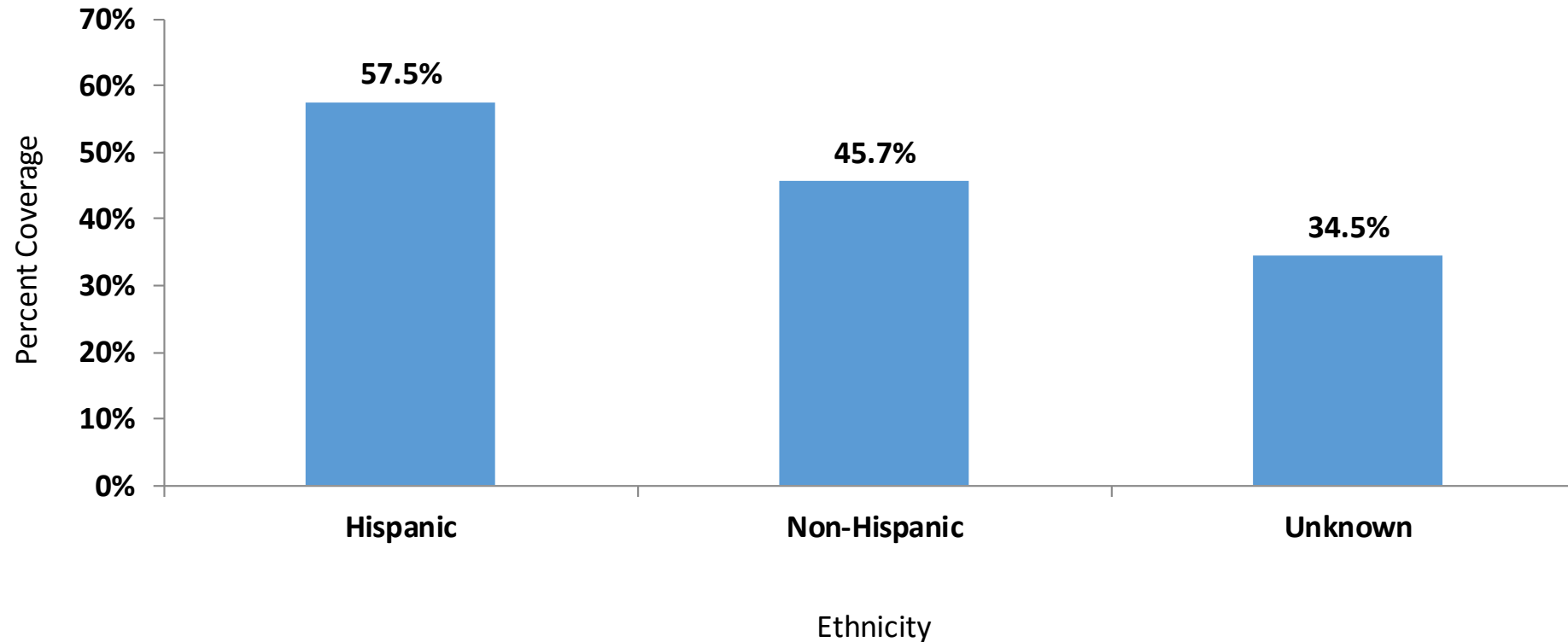
## #4c – Monitor Uptake of Vaccines: Comparison of NIS and CIR Estimates



\* In 2014, NIS-Teen implemented a [revised methodology](#) for defining adequate provider data.

# #3a – Identifying Under-vaccinated Populations: Ethnic Disparity in Flu Vaccine Coverage

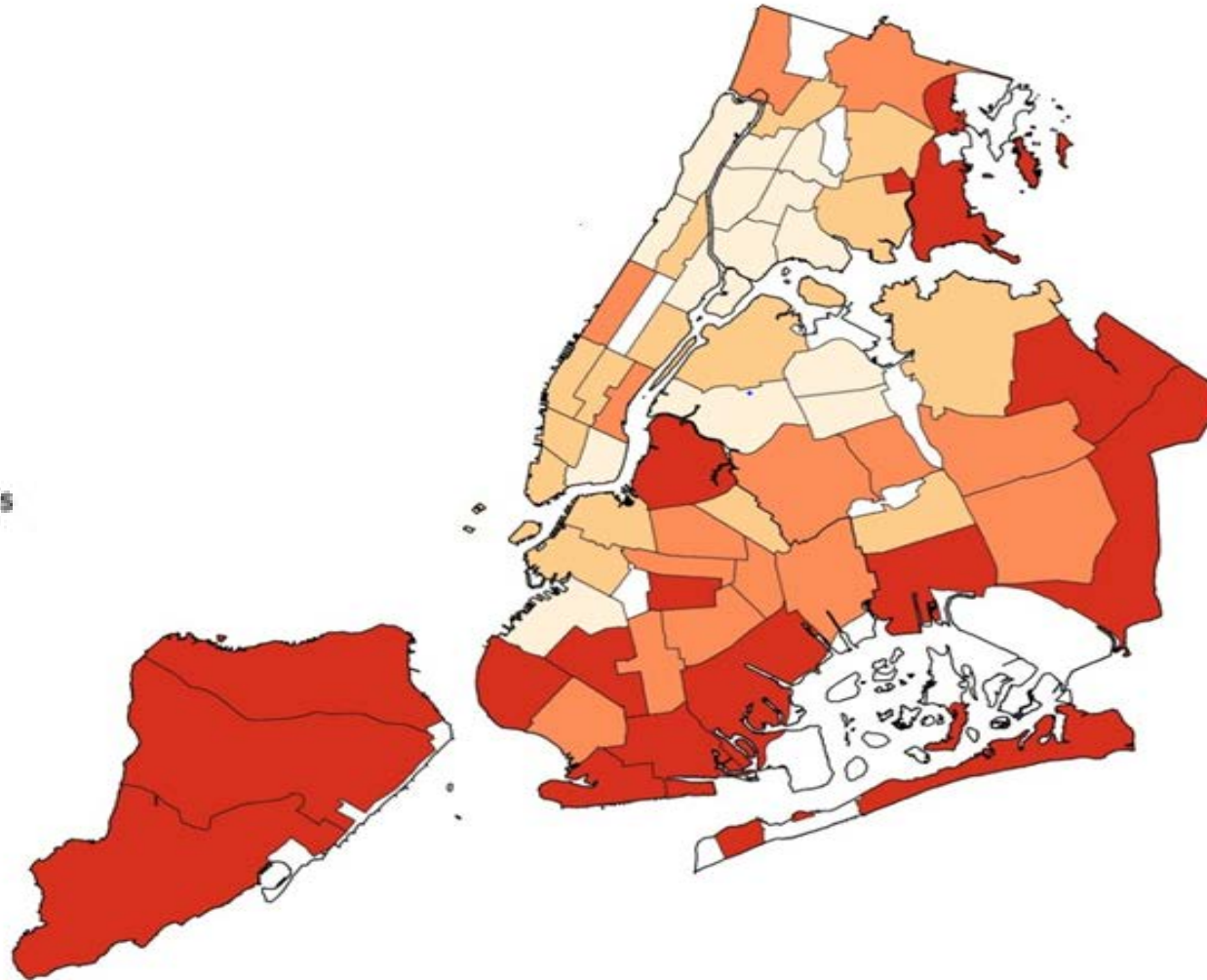
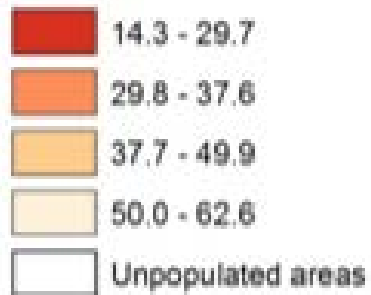
≥1 influenza vaccine dose among 6-59 month-olds, 2014-15 flu season



# #3b - WHERE are Under-immunized Children: HPV Vaccine Coverage among 13-17 Year-Olds

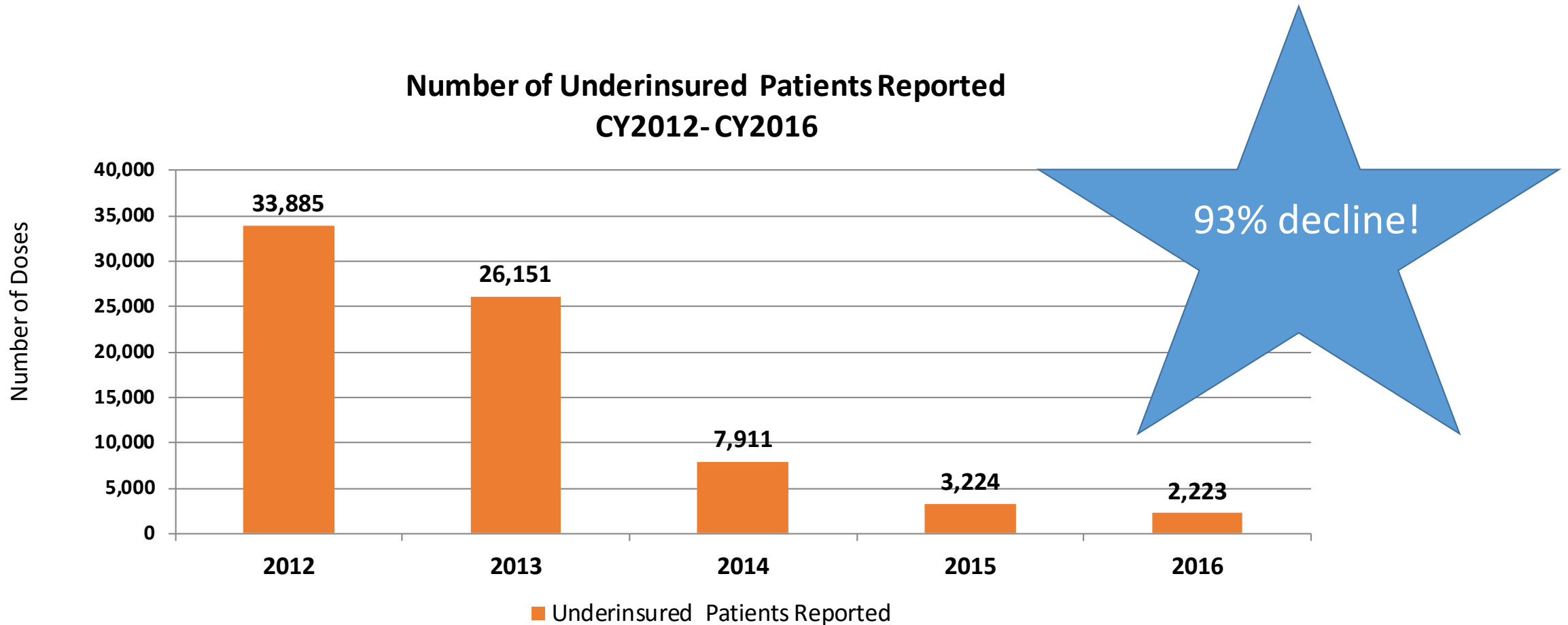
## Females, $\geq 3$ doses

Worse  
↑  
↓  
Better

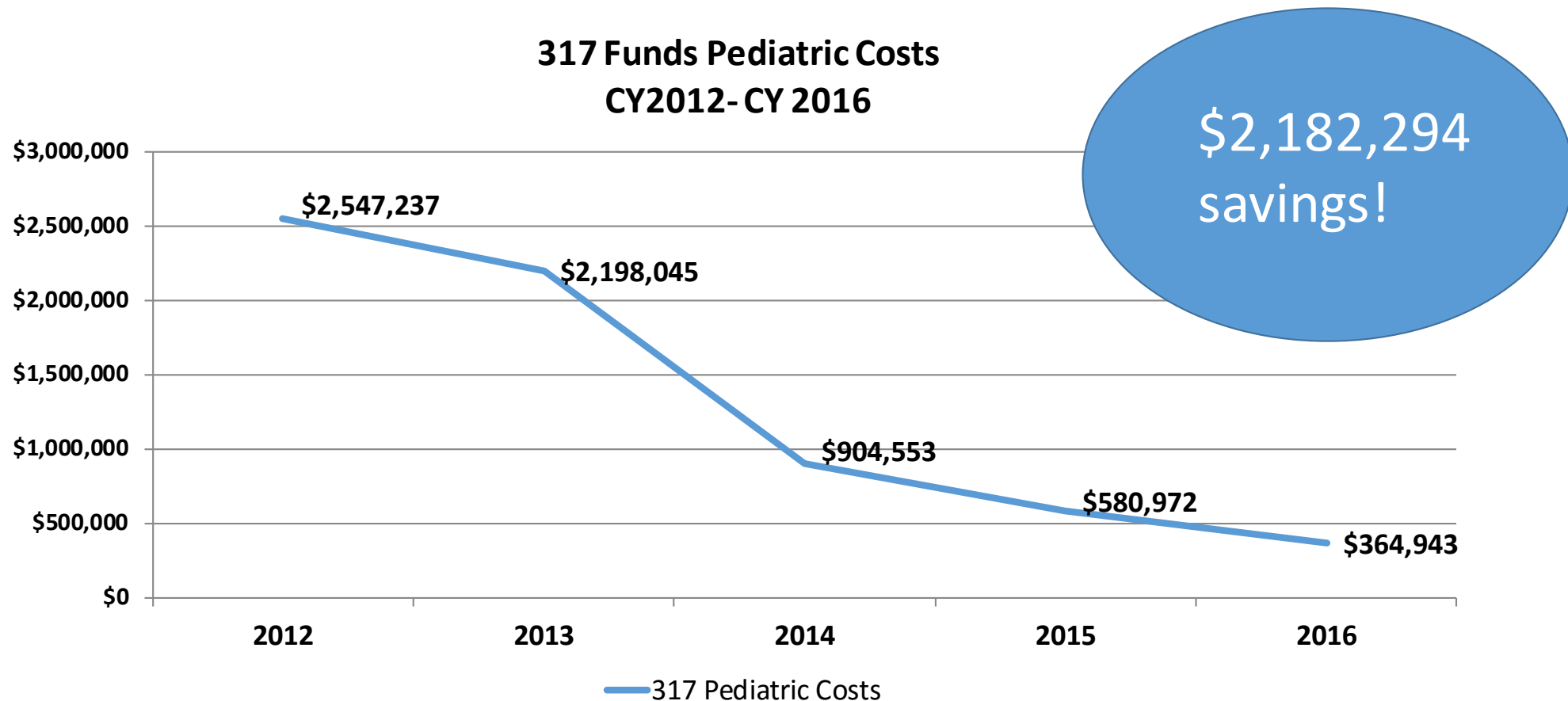




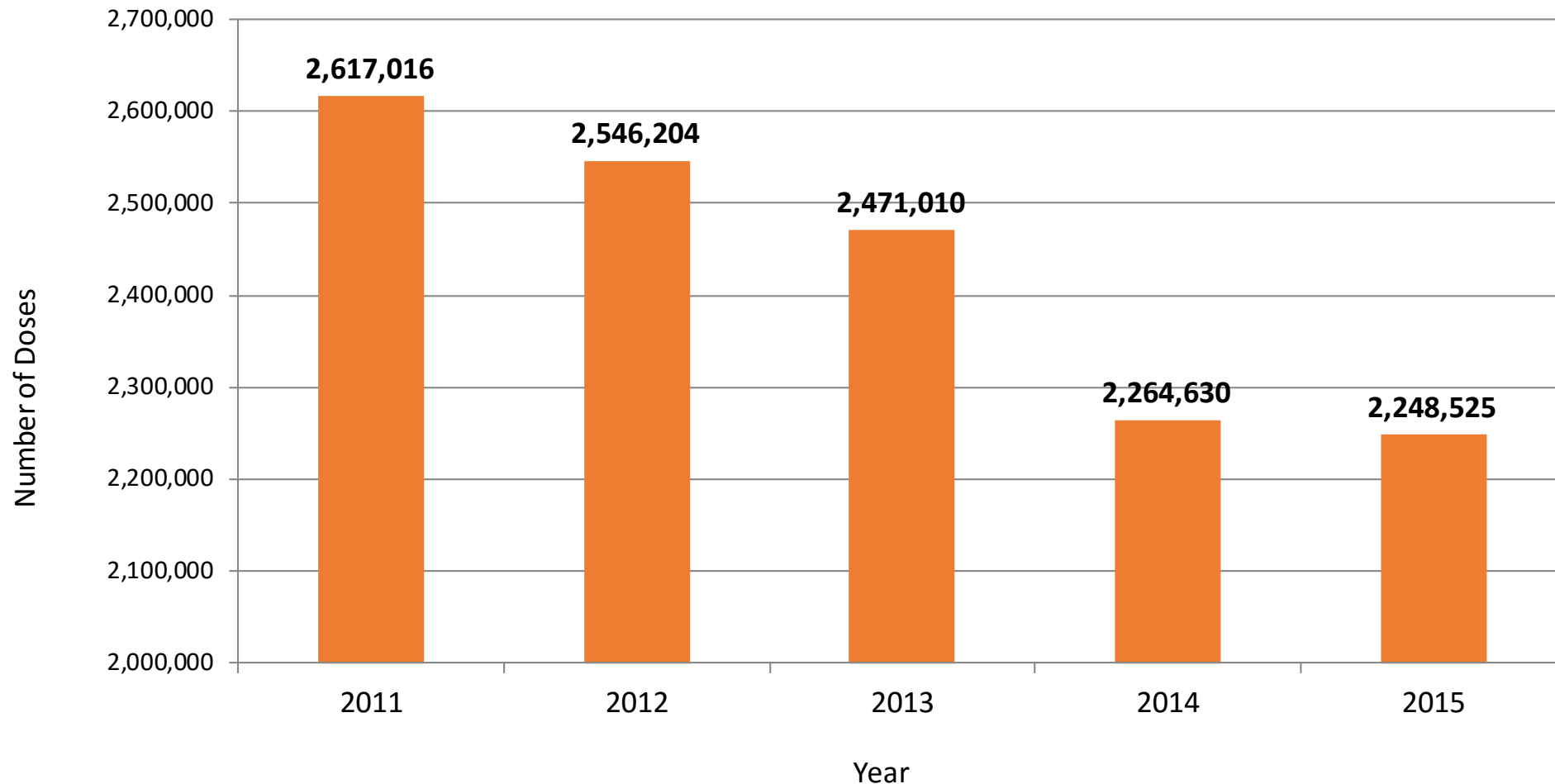
## #2a – Vaccine Accountability: Use of 317 Funds for Underinsured Children



## #2b – Vaccine Accountability: 86% Reduction in 317 Funds Needed for Children



# #1 - VFC Vaccine Dose Level Accountability: 14% Decline in VFC Vaccine Doses Distributed



# Conclusion

- Knowledge of current situation
- Real time data to guide decision making and interventions
- Assess status of program implementation
- Evaluation of program effectiveness
- Ensure strong stewardship of publically-funded vaccine

# Thank You for Your Attention!

- Questions will be at the end of the session
- Contact information:  
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