



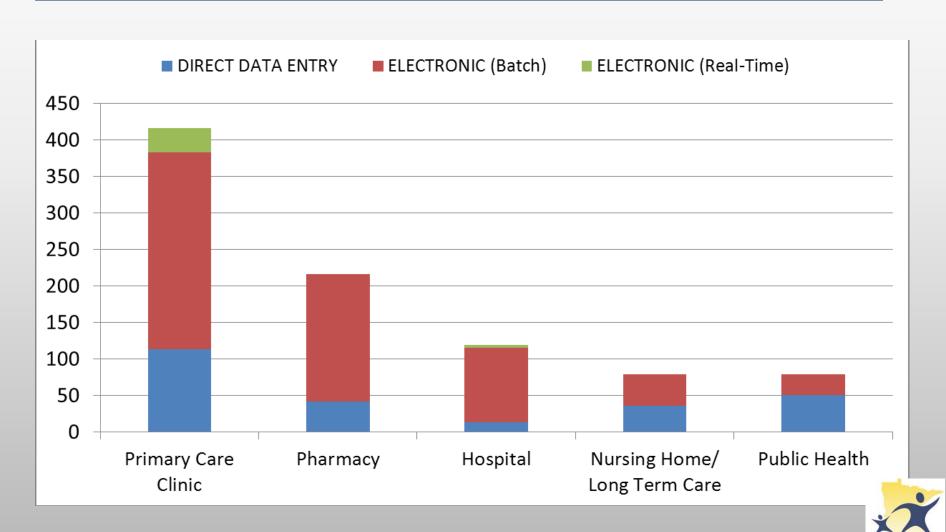
Challenges of Maintaining High-Quality Data in an IIS

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How Do Organizations Submit their Data?





Incoming MIIC Immunizations by Quarter of Entry and Submission Source

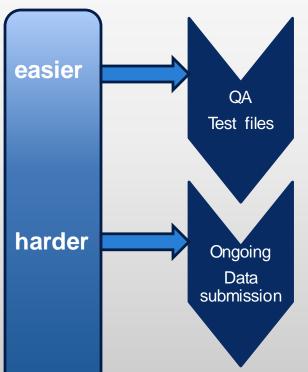
		SOURCE			
Year	Quarter of entry	Direct Entry	Batch	Real-time	Total
2011	3	177,982	1,178,292	209,433	1,565,707
	4	196,767	1,944,064	220,887	2,361,718
2012	1	108,143	1,013,704	114,587	1,236,434
	2	109,972	868,279	136,348	1,114,599
	Total	592,864	5,004,339	681,255	6,278,458





Communication of Data Issues

--from Initial Testing through Routine Submissions



- When a provider first signs on
- When they change EHRs
- Change mode of sending (e.g. flat file to HL7)
- Monitoring on-going data loads
 - Timeliness and completeness
 - Continuous data loads
 - Age-appropriate vaccines

Communication

- Get to the source of the problem
- Find the right person to talk to
- Clinical education for coders vs. mapping extract correctly



Types of Reports At QA stage

Format

- Flat file
- HL7

Valid immunizations

- Ageappropriate
- Appropriate number of vaccinations

Expected vaccine types

- Depends on type of practice
 - Peds
 - Adult

- More than 3 shots of Polio given before 24 months
- More than 20 shots given before 24 months
- More than 5 shots of the same vaccine given before 6 years
- MMR given before 12 months
- Pneumo-PCV7 given before 6 weeks
- Varicella given before 12 months
- More than 4 doses of DTP/aP given before 12 months
- More than 3 doses of DTP/aP before 6 months
- Any shot other than HepB given before 1 month
- More than 2 doses of Polio given before 4 months
- More than 3 doses of Pneumo-PCV7 given before 6 months
- More than 3 doses of Hib given before 6 months
- More than a total of 14 shots given before 6 months
- Immunizations Given Before BirthDate
- A combination Hib or Hib given to an individual >= to age 5 (-4 days)
- DTP, DTaP or DT given to an individual >= to age 7(-4 days)
- Pneumo-PPV23 given to a child under age 2(-4 days)
- A Td given to a child under age 7(-4 days) (except for Tdap)

 (Td may be given for doses 4 or 5 consider individually)
- A Pneumo-PCV7 given to someone greater than or equal to age 5(-4 days)
- A measles, a mumps, a rubella, or any combination of these vaccines record showing an individual born before 1957
- A third dose of HepB given before 6 months of age
- A Hib/HepB combo given before 6 weeks of age



Ongoing Monitoring of Submitted Data



Improbable Shots Report

Completeness and Accuracy Report



Issues Leading to Data Quality Problems

Completeness

- Non-participating providers
- Gaps in data sent from providers
- Not sending historical shots or past administered shots
- Not sending vaccine lot number and manufacturer
- Incomplete or invalid addresses, phone numbers

Accuracy

- Miscoding of vaccines in EHR
- Mis-mapping of vaccines from EHR to extracted file
- Sending ordered versus administered shots (or both!)

Maintenance of Provider/ Population Cohorts

- Moved or gone elsewhere MIIC not updated
- "Not my patient" anymore MIIC not updated





The Role of Assuring Quality MIIC Data

Immunization Providers and Public Health

- Provide complete, accurate, and timely data. All vaccines on all patients!
- Use MIIC for advanced reporting (e.g., Assessment, Improbable Shots)
- Use MIIC for outreach to under-immunized
- Follow-up on identified data quality issues

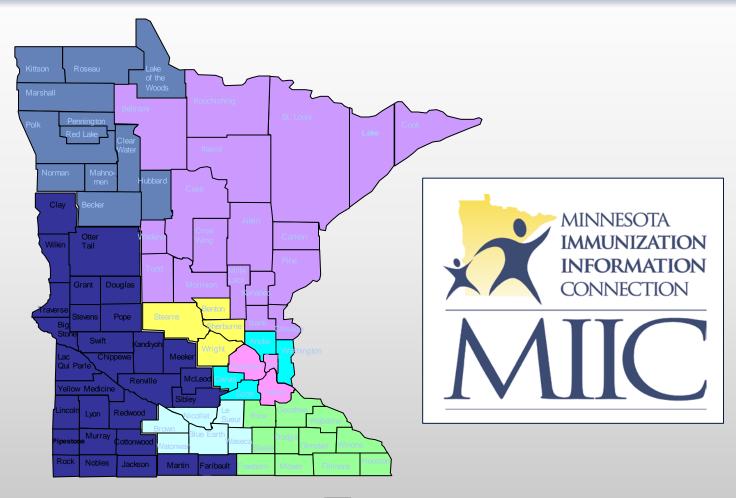
MIIC/Administrative

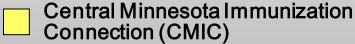
- Every new provider file must pass a QA process
- Monthly and quarterly monitoring reports
- Constant monitoring and follow-up for duplicates, systematic data input errors
- Rejection of unnamed records
- Require reporting by clinic site
- Build advanced reporting and outreach features into MIIC

MIIC Regional Coordinator

- Recruit non-participating providers
- Train and educate providers on submitting data and using advanced reports
- Facilitate and/or conduct outreach to address under-immunized
- Constant monitoring and follow-up based on reports







- Communities Caring for Children (CCC)
- Community Health Information Collaborative (CHIC)

ImmuLink/Metro Counties



Immtrack

- Southeast Minnesota Immunization Connection (SEMIC)
- Southwest Minnesota Immunization Information Connection (SW-MIC)



Data Quality Strategies

Issues

- Duplicate shots
- Not enough data to identify unique people
- Not enough resources to enter historical shots
- Providers do not commonly send in forwarding addresses

Current Efforts

- Manual review of each file for format and content
- Upload into MIIC test
- Current QA process
- Ongoing monthly reports to Regional Coordinators
- Students doing data entry

Future Plans

- Widen duplicate shot window
- Easier reports for MDH MIIC staff to run during test/QA process
- Monitoring reports to be run ongoing
- Use address checking resources





Engaging Providers

- Apathy from providers
 - Not "their" problem, it must be MIIC!
 - Use MIIC for look-up only
 - Not interested in advanced MIIC reports
- How to engage them?
- Creating more efficient and valuable reports in MIIC
 - Client Follow Up
 - Childhood Assessment Reports
 - Adolescent Assessment Reports





Ideas to engage providers

- Data Quality Dashboard
 - Run quarterly and delivered directly to providers, display:
 - -4313314 rates (or other measure)
 - -Number of possible duplicate clients/shots
 - -Timeliness/completeness statistics
- Reports for providers to monitor their own data quality
 - Types of vaccines by age groups
 - Timeliness
 - Rates







For More Information

- www.health.state.mn.us/immunize
- 651-201-5414
- Toll free 1-877-676-5414 greater MN
- E-mail: karen.white@state.mn.us