

# Immunization Information System 2018 – 2022 Functional Standards

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# What We'll Cover Today

**Context**



**Current Use**



**Progression**



**Process for Updating**



**What We've Heard**



**Hearing from You**



**Questions**



# Context

**Programmatic Goals**

Where

**Functional Standards**

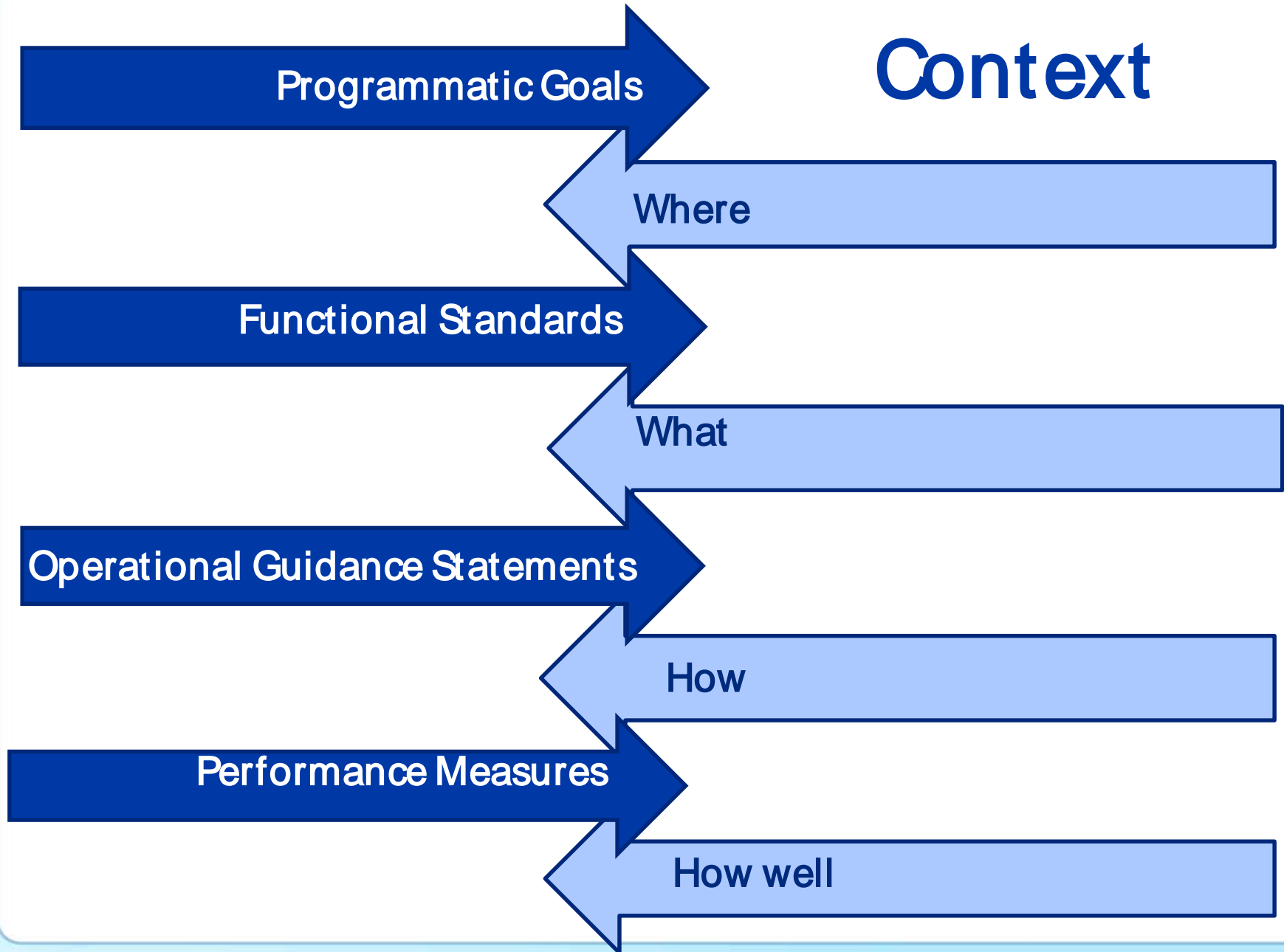
What

**Operational Guidance Statements**

How

**Performance Measures**

How well



# How We Use the Standards



**Immunization Program Operations Manual**



**IIS Annual Report**



**IIS Business Plan**



**IIS Assessment**



**Strategies for Support & Technical Assistance**



# Infancy of the Functional Standards

1997

**Program Managers: 14**

2001

**National Vaccine Advisory Committee: 12**

# NVAC IIS Standards

1. Store Data Elements
2. Establish Records for Newborns
3. Provide clinical user access
4. Receive and Process Data
5. Confidentiality
6. Security
7. Electronic Data Exchange
8. Clinical Decision Support
9. Reminder and Recall
10. Coverage Rate Reports
11. Produce Official Records
12. Complete, Accurate Data

# The Adolescence of Functional Standards

2013

**IIS Managers / IISSB: 27**

2015

**Operational Guidance Statements**





# 2013 – 2017 Standards

- 13. Security for hardware/software
- 14. Exchange Data with VTrckS
- 15. Receive Queries respond to  
E.H.R.s
- 16. Provide copies of records
- 17. Produce records for official  
purposes
- 18. De-duplicate records
- 19. De-duplicate vaccine events

# 2013 – 2017 Standards (cont.)

20. Provide Patient Active/Inactive Status

21. Track inventory

22. Make inventory available to users

23. Decrement doses administered

24. VFC Eligibility Tracking

25. VFC Reports

26. Support vaccine recalls

27. VAERS support

# The Young Adulthood of Functional Standards

2016

**2018 – 2022 Standards Update**



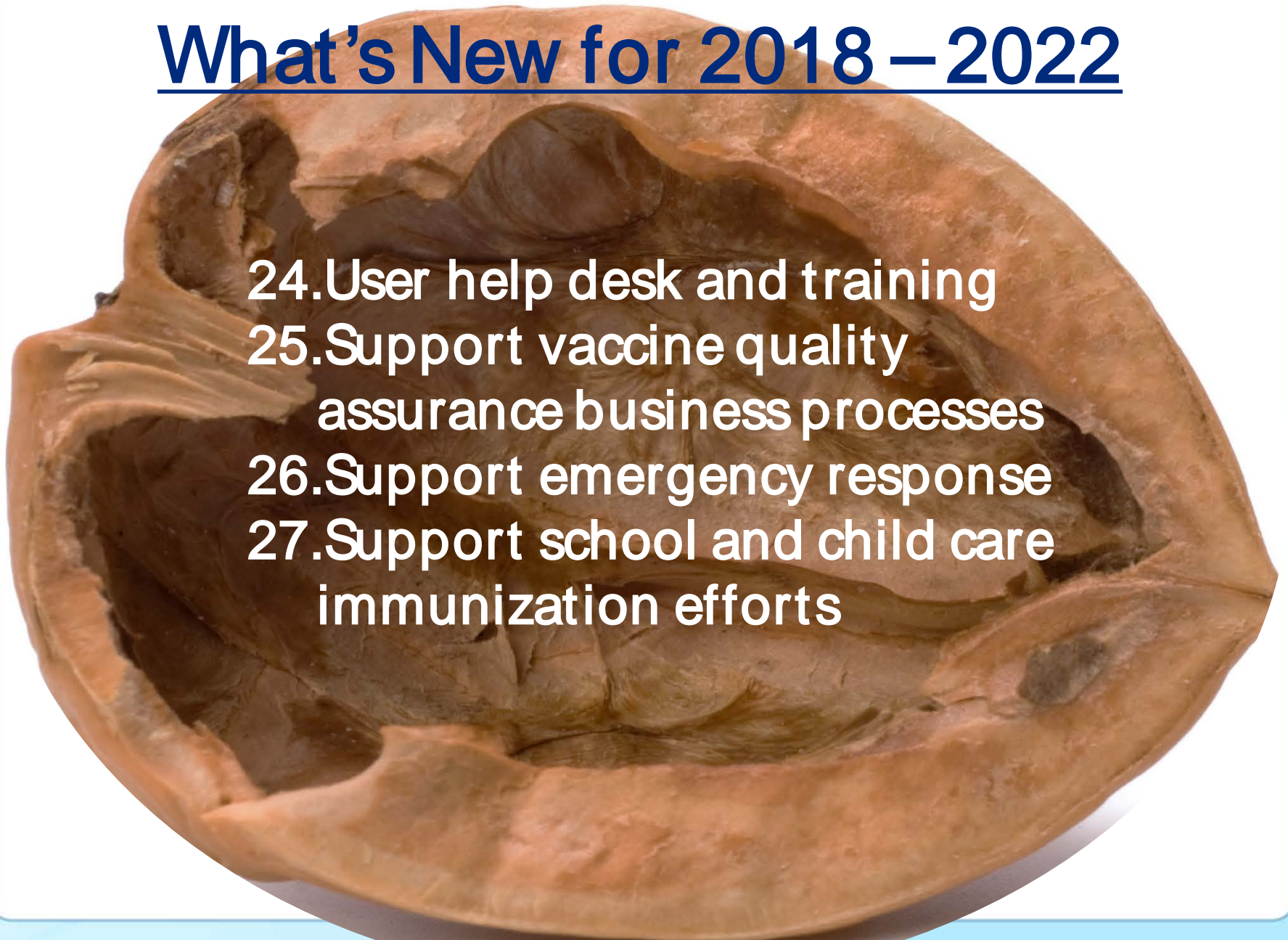
# What's New for 2018 – 2022

24. User help desk and training

25. Support vaccine quality  
assurance business processes

26. Support emergency response

27. Support school and child care  
immunization efforts



# Explain the Math ... Please



- The IIS records and makes available all submitted vaccination and/or demographic information in a timely manner.
- The IIS can store all IIS Core Data Elements



- With appropriate levels of authentication, IIS can provide copies of immunization records to individuals or parents/guardians with custodial rights.
- The IIS can produce an immunization record acceptable for official purposes.



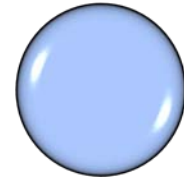
- The IIS vaccine inventory function is available to direct data entry users and can interoperate with EHR or other inventory systems.
- The IIS has a vaccine inventory function that tracks and decrements inventory at the provider site level according to VFC program requirements.



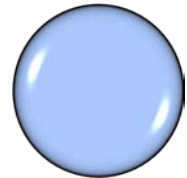
- The IIS can receive submissions in accordance with interoperability standards endorsed by CDC for message content/format and transport.
- When the IIS receives queries from other health information systems, it can generate an automatic response in accordance with interoperability standards endorsed by CDC for message content/format and transport.

# Overarching Principles

**Regulatory Framework: IIS Jurisdiction**



**No Reiteration of Existing Guides**



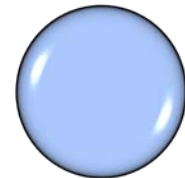
**Plain Language**



**Don't List Measures / Data Elements**



**Essential Infrastructure Grouping**



# Framework



*Essential Infrastructure Standards*



*Support clinicians in delivering age-appropriate immunizations.*



*Support the control and management of vaccine preventable disease outbreaks.*



*Support and inform stakeholder efforts to improve immunization rates.*



*Support providers in meeting VFC, state and local vaccine program requirements.*

# Framework

## Goal One

### XX.0 Functional Standard

XX.1 Operational Guidance Statement One

XX.2 Operational Guidance Statement Two

XX.3 Operational Guidance Statement Three

### YY.0 Functional Standard

YY.1 Operational Guidance Statement One

YY.2 Operational Guidance Statement Two



# Who We've Heard from So Far

## **Key Informants:**

Michelle Hood – NB  
Kim Tichy, IA  
Eric Larson  
Beth Cox, CDC  
Jenne McKibben, OR  
Tracy Little, OR  
Deborah Richards, OR  
Gerri Yett, AK  
Matt Bobo, AK  
Kim Salisbury-Keith, RI  
Tricia Washburn, RI  
Michael Flynn NY  
Nathalie Hartert, TN  
Kelly Moore, TN  
Catherine Harrelson, TN

## **Workgroup Members**

Elaine Lowery, PHII  
Mary Beth Kurilo, AIRA / PHII  
Rebecca Coyle, AIRA  
Rob Savage  
Amy Groom, IHS  
Baskar Krishnamoorthy, FL  
Bob Swanson, MI  
Mary Woinarowicz, ND  
Denise Wilson, GA

## **Staff:**

Bill Brand, PHII  
Natalie Viator, PHII  
Sara Sanford, PHII  
Jan Hicks-Thomson, CDC

## **Vendors:**

Brad Couse, Envision  
Wheeler, Gary , HP  
Rae Barr, STC  
Noam H. Arzt, HLN

## **CDC Team**

Warren Williams  
Laura Pabst  
Janet Fath  
Ulrica Andujar  
Loren Rogers  
Bobbie Strickland  
Susan Brown  
Stuart Myerburg  
David Lyalin  
Laura Pabst

# Initial Reflections of the Workgroup

- Workgroup members rated the Functional Standards:
  - OK as written, can live with it
  - Requires some discussion and refinement
  - Requires considerable discussion and refinement

Responders rated the Standards as needing only some discussion or OK as written.

- 8 rated as OK as written.
- 9 rated as needs some discussion by  $< 50\%$ .
- 10 rated as needs some discussion by  $\geq 50\%$ .

# What We Heard ...

The functional standards provide a roadmap to where we want all of the IIS to go.

**Standards make us feel like the work we are doing is validated.**

The input process being inclusive and more widely disseminated is really great.

**The Operational Guidance Statements give a little more to help identify what the Standards means – and what had to be in place to make the IIS functional.**

We're making great progress. The IIS has changed the paradigm of public health – we give data back to providers and we are broadening it to other programs like lead, hearing screening etc., we are so successful.

# What We Heard ...

Be cautious that Guidance Documents don't become Standards.

**I cannot support Standards that say an IIS “ensures,” things that may only be partially in the control of the IIS.**

Industry standards may change during the five year period. How do we keep up within the five years?

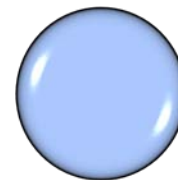
**Do I think they're right yes. Are there little things I'd change yes.**

# What We Heard ...

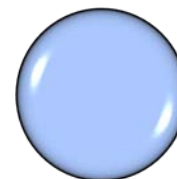
- Saying something should be done on a regular basis, timely fashion, or periodically is too broad – define the timeline.
- Saying something should be done annually is too narrow. This should be left to the IIS.
- The Functional Standards and Guidelines for this section are fairly clear as written.
- I cannot support some statements in this section.
  - Having overarching policy and structure statements helps keep the document clean – I like it!
  - Add policy statements to each Standard or Operational Guidance Statement.
- I'm glad to see the emergency response Standards – they reflect an important role of our IIS.
- The emergency response section should be omitted.

# Now, We Want to Hear from You

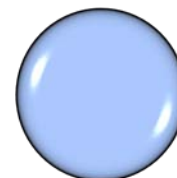
**Traditional: Mark it up and Send it Back!**



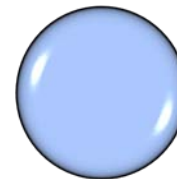
**Online: Fill it in and Submit it!**



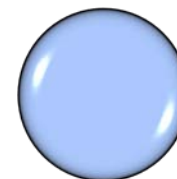
**Call: 404 – 718 - 1555**



**E-mail: [IISINFO@CDC.GOV](mailto:IISINFO@CDC.GOV)**



**Just Do It**



**Look for a Link!**  
**Look for an e-mail!**  
**Let us know**



**By: March 31, 2017**

# Final Package – April 2017



**Functional Standards Narrative**



**2013 – 2017 / 2018 – 2022 Cross Walk**



**2018 -2022 Data Elements**



**HP2020; VFC Ops Guide; IPOM Cross-walk**



**Resource list**





A vibrant bouquet of 3D stars in various colors (yellow, orange, red, pink, purple, blue, green) with the text "THANK YOU!" overlaid in large white letters. The stars are arranged in a fan-like shape, creating a sense of depth and celebration. The background is a light blue gradient with a white border.

**THANK YOU!**

# Contact

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For more information please contact Centers for Disease Control and Prevention

1600 Clifton Road NE, Atlanta, GA 30333

Telephone, 1-800-CDC-INFO (232-4636)/TTY: 1-888-232-6348

E-mail: [cdcinfo@cdc.gov](mailto:cdcinfo@cdc.gov) Web: [www.cdc.gov](http://www.cdc.gov)

