



Data at Rest

AIRA Discovery Session and Town Hall October 3, 2022 4-5 PM EST

Agenda



M&I Overview – Kevin Snow, Co-Chair, MACAW



Data at Rest (DAR): Introduction - Assiatou Diallo, AIRA



DAR Project Experience -

Katie Cruz, NMSIIS
Peter Dieringer, WA IIS
Katy Riter, WA IIS



DAR into IIS Assessment – Eric Larson, AIRA



Questions/Discussion/Open Forum – All



Wrap Up – Kristi Siahaya, AIRA

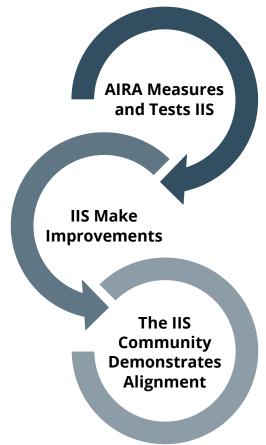
Measurement & Improvement Overview

Kevin Snow, MACAW Co-Chair

Measurement and Improvement Initiative – What is it?

- The IIS Measurement and Improvement (M&I) Initiative began in 2015 in collaboration with CDC as an effort to:
 - Test IIS alignment with standards
 - Provide IIS with information and assistance to improve
- All testing is conducted by AIRA through:
 - Connecting with pre-production systems or analyzing deidentified data





Who is Supporting This Process Along with AIRA?

MACAW

The Measurement for Assessment and Certification Advisory Workgroup, made up of IIS, Immunization Program Managers IIS Vendors, and Federal Partners

CDC

Centers for Disease Control and Prevention, our funders, supporters, and collaborators

NIST

National Institute of Standards and Technology, who collaborate with AIRA to develop tooling to support measurement

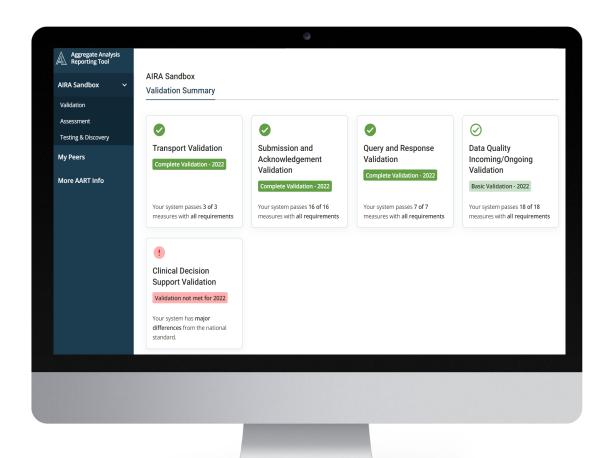
IIS and Imms Programs

IIS and Immunization
Programs do the heavy
lifting of analysis,
planning, funding, and
implementation

IIS Vendors

IIS Vendors support IIS and Immunization Programs in planning and implementation

The AART Dashboard – Your Gateway To Data



Click to drill down to:

- Measure results and information
- Test case outcomes expected and actual
- Historical perspectives
- Results from your peers who have shared their data and information

M&I Measure Development and Approval Process

Measures Created

MACAW prioritizes, discusses, and develops measures

Measures Shared

Measures are shared with IIS Community for review and input

Measures Refined, Updated

Comments are compiled and measures updated

Measures Implemented

Testing occurs and results are available in AART







Current Content Areas

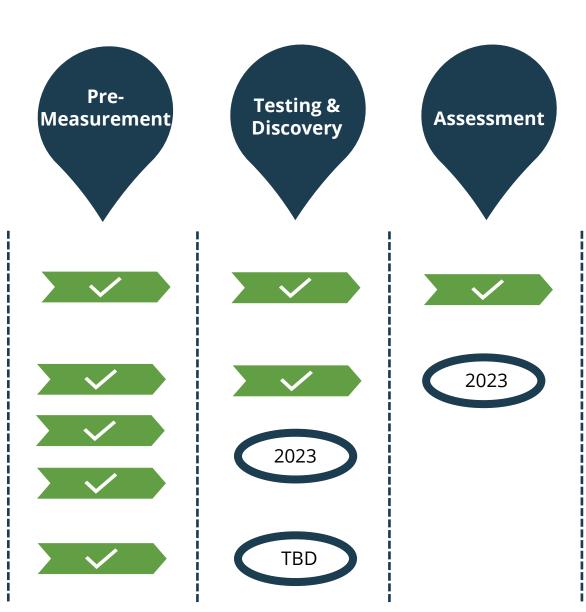
Transport
Submission/Acknowledgement
Query/Response
Clinical Decision Support
Data Quality Incoming/Ongoing

Data at Rest

Patient Matching

Provider Participation

Onboarding, Vaccine Matching, Patient Saturation, and Vaccine Saturation





Validation

Data at Rest Overview

Assiatou Diallo, AIRA



Data at Rest is the measurement of data that has been accepted into the IIS production environment.



Measuring Data at Rest

Extract

Transform

Load

Analyze

IIS staff will pull a predefined cohort of patients from their production database into a flat file. IIS staff will run an AIRAprovided tool on their extracted data.

This tool will assess for data quality indicators.

The output of this tooling will be a set of aggregate detections void of identifiable patient data.

IIS staff will upload the aggregate file generated during the Transform step to AIRA for analysis.

AIRA will analyze and produce individualized reports for the IIS to review and use to improve their data quality.





Cohort

Two views available for your data

IIS-Wide Report

Provides a view of the overall picture of the completeness, validity, and timeliness of the IIS data.

Provider Breakdown Report

Stratifies the entire cohort of data by provider.

Presentations from Testing & Discovery

New Mexico, NMSIIS

Katie Cruz, IIS Manager

Washington State, WAIIS

- Peter Dieringer
- Katy Riter



New Mexico Data at Rest (DAR) Project

Kathryn Cruz, NMSIIS Manager October 3, 2022

Project Initiation – First Steps

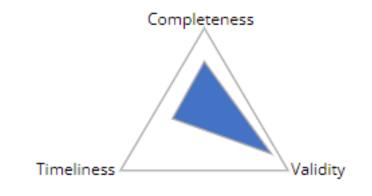
- AIRA National Meeting 2021
- NM requested information in January 2022
- Notified Envision to obtain data extraction scripts
- DAR Kickoff call recording
- DAR webpage: steps, resources, reference guides

Testing and Discovery

- Data Extraction completed 02/09/2022
- Data Transformation #1 completed 2/14/2022
 - Minor difficulties with Command Line Prompt Tool
- Data Upload #1 completed 03/11/2022
- Release of updated version of Command Line Tool to address issue of age groupings
- Data Transformation #2 completed 3/24/22
- Data Upload #2 completed 3/24/22

Data Analysis - Reviewing Results

- Error rate of 0.50%
- Biggest area of concern is regarding timeliness of reporting
- Most demographic fields have a high rate of providers not meeting the 85% threshold for reporting required



Measure	Measure Title	Meets	Does Not Meet
1	Completeness Indicators	9	12
2	Validity Indicators	16	3
3	Timeliness Indicators	1	7

Summary Recap

- Staff 1 person
- Time
 - Data Extraction: ~6 hours
 - Data Transformation: ~10 hours
 - Data Uploads: ~1 hour
- Resources
 - Download Command Line Tool
 - DAR Website
 - Eric and Assi



Data Quality Improvement: Next Steps

- 1. Hire temporary contact health educators (2)
- 2. Identify priority areas
- 3. Obtain feedback on barriers or reasons for poor reporting
- 4. Transition any to data exchange, if possible
- 5. Develop and/or refine resources
- 6. Establish benchmark so we can track progress
- 7. Rerun annually with same cohort



Kathryn Cruz Kathryn.Cruz@state.nm.us



Washington Data at Rest (DAR) Project

Katy Riter, Peter Dieringer October 3, 2022



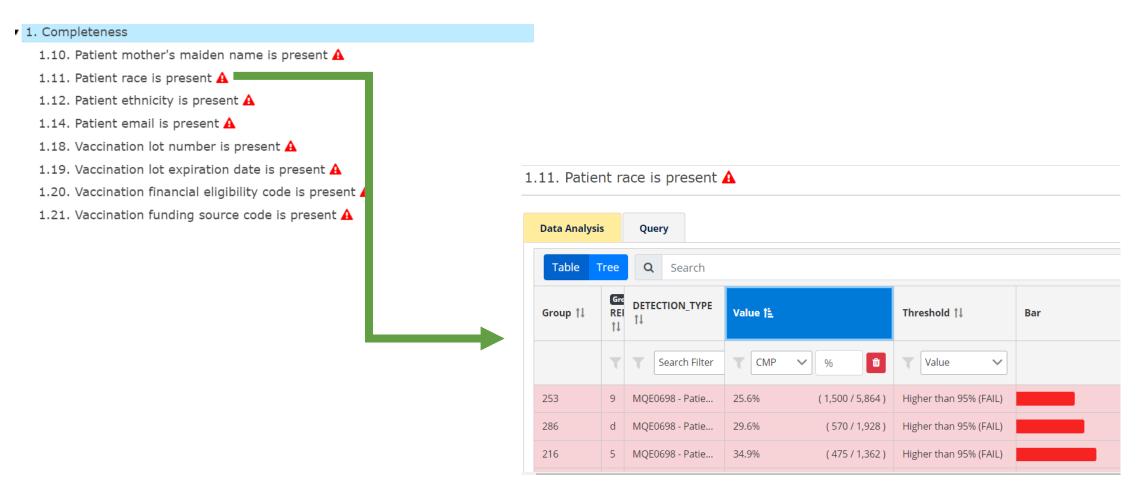
WA DAR Participation

- Participation began in 2019 with the pilot project
 - Extract
 - first year core database via SQL, 2022 replica
 - Transform and load
 - initial issue with raw file; troubleshooting resolved issue
 - PowerShell used to transform, ensuring removal of spaces in file names
- Data analyst conducted the analysis on 6/15/2022

WA DAR Results – IIS Wide

- Patient completeness
 - Mother's maiden name, race, ethnicity and email
- Vaccination completeness
 - Lot number, financial eligibility
 - Expiration and funding to be re-queried
- Timeliness
 - 88% under 30 days

WA DAR Results – Provider Breakdown



WA DAR Programmatic Impact

- One of multiple tools to assess/monitor data quality
- Inform further analysis
- Identify metrics for data quality dashboard
- Identify areas of focus
- Prioritize outreach to providers

WA Next Steps

- Implement data quality dashboard
- Monitor measures over time
- Outreach to providers with high errors
- Provider scorecards

DAR into Assessment

Eric Larson, AIRA



Data at Rest Content Area

In Scope

- Data quality of patientlevel data elements
- Data quality of vaccinelevel data elements

Out of Scope

- Data quality of HL7 messages
- Data quality of providerlevel data elements
- Coverage reports
- Inventory management

DAR Measures from T&D to Assessment







24
Completeness

20 Validity **1**Timeliness



Completeness

Completeness is the degree to which full information about a data set, record, or individual data element is captured in the IIS, i.e., the proportion of stored data measured against the potential of "100% complete."

The following measure the percent of patient or vaccination records in which the data element was present (e.g., had a value).

Completeness - Patient

- First name
- Middle name
- Last name
- Birth date
- Gender
- Address
 - Street line 1
 - City
 - State
 - Zip
 - Complete Address

- Race
- EthnicityPhone number
- Email
- Mother's maiden name
- Responsible person
 - First name
 - Last name

Completeness - Vaccination

All Doses

- Vaccine administration code
- Vaccine administration date
- Vaccine information source

Administered Doses

- Vaccine lot number
- Vaccine lot expiration date
- Vaccine eligibility code
- Vaccine funding source



The degree to which the data conforms to the syntax (i.e., format, type, range) of its definitions, (e.g., to the rules of what is accepted or expected by the IIS)

Validity - Patient

- Patients born on:
 - the first of the month do not exceed normal distribution of birth dates.
 - the 15th of the month do not exceed normal distribution of birth dates.
 - the last day of the month do not exceed normal distribution of birth dates.
- Patient has more vaccinations than expected.

Validity - Vaccination

Vaccine administration date(s)...

- is after vaccine lot expiration date.
- is before birth date.
- on the first day of the month do not exceed normal distribution of administration dates.
- on the 15th of the month do not exceed normal distribution of administration dates.
- on the last day of the month do not exceed normal distribution of administration dates.

Vaccine administration code...

- was administered at an improbable age.
- is unspecified for an administered vaccination event.



Validity – Vaccination continued

- Vaccine lot number has an invalid prefix.
- Vaccine lot number has an invalid infix.
- Vaccine lot number has an invalid suffix.
- Vaccine lot number is invalid.
- Vaccine lot number is too short.
- Vaccine administration code is unrecognized.
- Vaccine Manufacturer is unrecognized.
- Vaccine Administration route is unrecognized.
- Vaccine Body site is unrecognized.



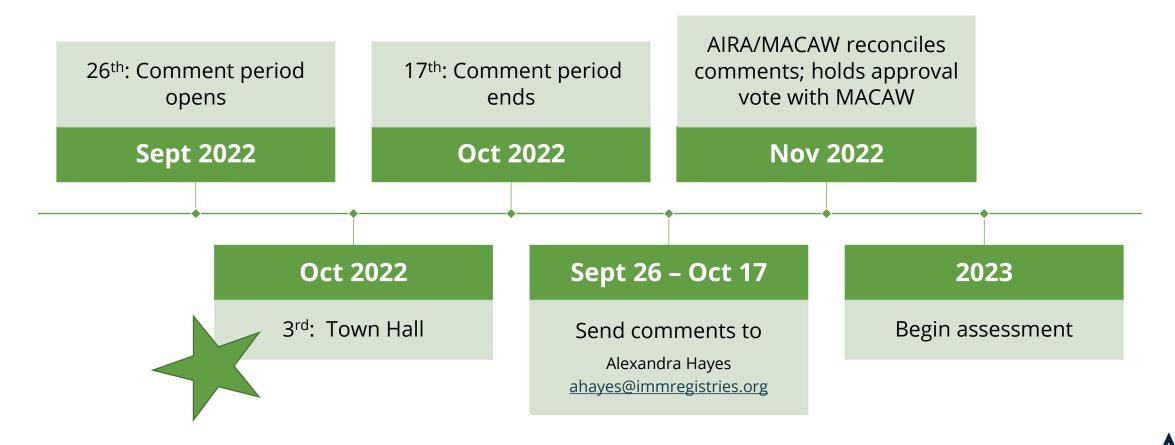
Timeliness

The amount of time between the occurrence of the real-world event and its documentation in the IIS, (i.e., the time lag between the date of vaccination or birth and the date the record is received by the IIS)

Timeliness - Vaccination

Administered vaccination events are entered into the IIS within one (1) calendar day from administration date.

Timeline

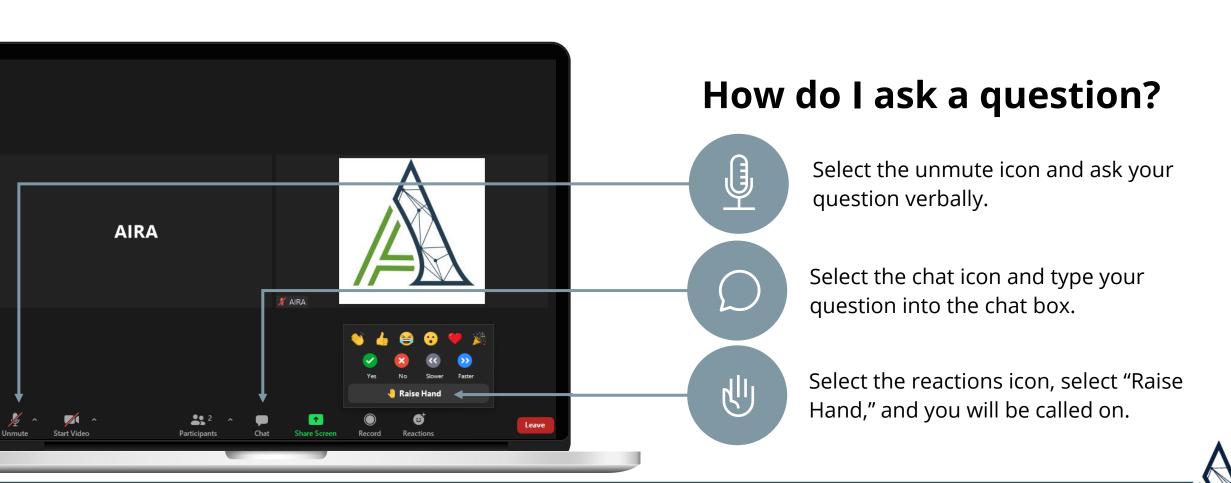


Questions/Discussion Open Forum

All



Question & Answer



Wrap Up/Next Steps

Kristi Siahaya, AIRA

Thank you for joining us, for your input, and for your continued improvement work!

Kevin Snow: ksnow@envisiontechnology.com

Eric Larson: elarson@immregistries.org

Assiatou Diallo: adiallo@immregistries.org

Thank you to our presenters, and thanks to all of you for joining us!

Please complete a brief evaluation survey.

The next Discovery Session will be on **October 24, 2022**