

CONNECTICUT IMMUNIZATION REGISTRY AND TRACKING SYSTEM (CIRTS)

PROGRAMMATIC CONTACT	Nancy Caruk
Email	nancy.caruk@ct.gov
Phone	860-509-7929
TECHNICAL CONTACT	Diane Fraiter
Email	diane.fraiter@ct.gov
Phone	860-509-7938

PARTICIPATION

A	Proportion of children < 6 years of age in the geopolitical area with 2 or more immunizations recorded in the IIS.	76%
B	Proportion of public provider sites in the geopolitical area enrolled in the IIS -- Proportion of enrolled public provider sites that have submitted data in the last 6 months of 2007	100% -- 100%
C	Proportion of private provider sites in the geopolitical area enrolled in the IIS -- Proportion of enrolled private provider sites that have submitted data in the last 6 months of 2007	100% -- 100%
D	Age groups included in IIS.	Birth through 5 years or under 6

MINIMUM FUNCTIONAL STANDARDS

1	Electronically store all <i>nine</i> NVAC core data elements.	NO
2	Average number of weeks between a child's birth and the establishment of an IIS record.	6
3	Provider can access immunization information in the IIS prior to and/or during patient encounter.	YES
4	Receive and process vaccine and other immunization encounter information within one month of vaccine administration.	NO
5	Has a written confidentiality policy implemented.	YES
6	Has a written security policy implemented.	YES
7	IIS can process an HL7 query for a specific immunization record and return messages with multiple matches or return the record (VXR).	NO
8	IIS can process an HL7 query for a specific immunization record and upload that record into the database (VXU).	NO
9	Automated function at the provider level to determine an individual's immunization needs based on ACIP recommendations.	NO

10	Electronically generate recall and/or reminder notices.	NO
11	Produce immunization coverage reports by provider, geographic region and/or age group.	YES
12	Authorized users can print an "official immunization record" for an individual.	NO
13	Produce a single consolidated and accurate immunization record or an individual.	YES

DATA QUALITY

14	IIS is populated by birth data.	YES
15	Monitor patient de-duplication process to assess the amount of duplicates needing manual resolution.	YES
16	Assess the proportion of missing or nonsense data for each of the nine NVAC core data elements.	NO
17	Address patient status:	IIS does not address patient status issues.
18	De-duplicate records at the vaccine level:	IIS does not deduplicate records at the vaccine level.

DATA EXCHANGE

19	Percentage of different types of electronic format that are received by the IIS over the course of a year:	
	HL7 (any message type or version)	
	Flat file	100
	Database format	
	XML schema	
	Digitally scanned	
	Other	
20	Number of provider EHRs providing immunization data directly to the IIS through an electronic interface.	0
21	Access/data exchange with IIS (from 2006 IISAR):	
	Hospitals	None
	Daycare and Head Start	None
	Elementary schools	None
	High schools	None
	Higher education	None
	Correctional facilities	None
	WIC	None

STD/HIV	None
Long-term care facilities	None
Health plans	None
IHS	None
Veterans Administration	None
Juvenile facilities	None
Military	None
Family planning	None
Medicaid	None
Medicare	None

DATA USE

22	Epidemiology:	
	routine surveillance (i.e., lookup of vx hx)	YES
	outbreak management	NO
	new vaccine uptake	YES
	adoption of new vaccine recommendation	NO
	monitor contraindications	NO
	track adverse events	NO
	track children born to HbsAG unknown/positive mothers for intensified HepB surveillance	YES
23	Vaccine inventory management:	
	doses administered report	NO
	vaccine recall	NO
	VFC eligibility	NO
24	Assessments:	
	UTD status	YES
	school assessments	NO
	vaccine coverage	YES
	pockets of need (geopolitical or demographic pockets of need)	YES
	AFIX	YES
25	Emergency preparedness	NO