



## SNAPSHOTS

*Immunization information system news from the American Immunization Registry Association (AIRA)*

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Welcome to SnapShots, the American Immunization Registry Association's newsletter about the progress, best practices, and accomplishments of immunization information systems across the country. We invite you to share news about your IIS. Email us at [aira@immregistries.org](mailto:aira@immregistries.org) or call us at (212) 676-2325 with information about a successful programmatic or technical innovation, major accomplishment, or milestone that your IIS has reached. SnapShots is sent to subscribers quarterly and posted on AIRA's web site: [www.immregistries.org](http://www.immregistries.org).

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### President's Report

As all the states and U.S. territories prepared for the massive ordering and distribution of the H1N1 vaccine, the word that immunization registries were ready and available to be used by all types of health care providers was also being broadcast. Many IIS experienced an influx of providers interested in using the system to track vaccine given to individuals of all ages. So, just as this influenza season will eventually move from winter to spring, the coming year will bring opportunities and challenges for IIS around the country. AIRA will continue to be an important force to compile and disseminate to members and interested others, best practices related to H1N1 vaccine accountability and tracking. The 2010 special edition of SnapShots will focus specifically on IIS activities related to H1N1 and will be printed for distribution at the NIC.

On a separate note, before the H1N1 vaccine became a central focus, the AIRA board met this past August at a face-to-face, facilitated strategic planning session. During that event, we reviewed the results of the recent board and membership survey, as well as AIRA's past accomplishments, current and future challenges, and opportunities. The Board concluded that AIRA reaffirms its commitment to:

- promote and support the use of standards,
- share collective knowledge and successes,
- represent IIS programs on emerging public health issues that may impact IIS operations,
- promote advocacy for funding for IIS through legislation and policy development, and
- expand strategic partnerships that are critical to the accomplishment of its vision and mission.

In addition, the Board reviewed and revised the AIRA mission and vision statement and developed a purpose/ value statement.

**Vision:** A healthy, fully immunized community supported by the electronic sharing of information.

**Mission:** The American Immunization Registry Association (AIRA) is an organization whose mission is to promote the electronic use, tracking and sharing of complete immunization records for people of all ages.

**Purpose /Value Statement:** The purpose of the American Immunization Registry Association (AIRA) is to support and promote the development, implementation and interoperability of Immunization Information Systems through partnerships, peer and professional education/training, and resource development. AIRA values the voluntary and collaborative interaction of all of its members and interested others to develop the electronic health care infrastructure necessary to prevent and control vaccine preventable diseases.

Equally important, the Board reaffirmed AIRA's management goals:

1. To maintain qualified staff to carry out AIRA services and activities.
2. To maintain an effective, active and informed Board of Directors whose governance and support roles help achieve the AIRA vision and mission.
3. To seek and secure diversified funding to ensure sustainability of the organization.
4. To increase AIRA visibility as a voice for IIS policy and best practices.
5. To ensure that AIRA services and activities meet the needs of its members.
6. To build a network of AIRA volunteer members that support AIRA project activities through committee participation.

So, as the new AIRA President, I look forward to working with the new Board and keeping our association on track to better serve its members during and beyond this challenging H1N1 influenza season. I invite you to participate in upcoming AIRA committees and events such as open calls, webinars, and/or NIC pre-conference workshops. Your input and involvement is what makes this organization work!

*Anne*

Anne Cordon (San Diego, CA) AIRA President

## New AIRA Board of Directors

In October, AIRA members went online to vote for new members of the AIRA Board of Directors. Three voting positions were open; two non-voting positions were open; and the office of Treasurer was open. The newly elected Board members attended their first AIRA Board meeting on November 23 along with the new AIRA President, Anne Cordon from San Diego. AIRA is proud to present the AIRA Board for 2010:

Anne Cordon, President  
Sherry Riddick (WA), Past President  
Emily Peterson (MN), Secretary  
Mark Sawyer (San Diego), Treasurer  
Bridget Ahrens (VT)  
Don Blose (OK)  
Nichole Lambrecht (KS)  
Loretta Santilli (NY)  
Cecile Town (IHS)  
Katie Reed (HP)  
Rob Savage (NG)

AIRA also wants to thank those Board members whose terms have ended for their valuable contribution to furthering the development of IIS around the country: Shawn Box, Sue Salkowitz, Dorothy Williams, Therese Hoyle and Anna Dragsbaek. We hope that they will continue to remain involved and participate in AIRA activities.

## Nevada WebIZ Awarded 2009 Nevada Public Health Program of the Year Award

The Nevada Public Health Association awarded the Nevada State Health Division's Nevada WebIZ (Immunization Information System) the 2009 Nevada Public Health Program of the Year award. Below is the nomination paragraph that was written on our behalf.

“The Nevada State Immunization Registry Program has taken aggressive action to significantly increase Nevada's childhood immunization rates by effectively implementing NRS 439.265, which requires that all children's vaccines, effective July 1, 2009, be recorded on the state's web-based immunization registry, known as WebIZ. The program has pro-actively reached out to Vaccines For Children program providers, private stock vaccine providers, major health care stakeholders and other health care community-based organizations to create community awareness of the new regulation and to train health care providers on how to record children's vaccinations in WebIZ. Under the leadership of program manager, Erin Seward, all of Nevada's hospitals, Von's



Erin Seward (right), Nevada WebIZ Program Manager, accepts award.

Pharmacies, Walgreens' Pharmacies, Walgreens' Take Care Clinics, and 80% of Vaccines for Children providers have been trained on WebIZ and are currently recording children's vaccinations on the registry. Thanks to robust use of WebIZ, the immunization records of our highly mobile population will be accessible to providers statewide on the Web, resulting in more children being vaccinated, a higher vaccination series completion rate, and fewer expensive duplicate vaccinations being given.”

*Submitted by Erin Seward (NV)*

## **CDC Reports on H1N1 Activity Update**

In light of the fact that H1N1 is the focus of activity in every IIS across the nation it made sense to pick up the phone and contact our friends at CDC to see what the H1N1 world looked like from their perspective. Recently, I called Warren Williams to see if he could spend a few minutes and provide me a snapshot.

Warren stated that from the beginning of the H1N1 related activity, it is clear that IIS professionals across the project areas are stepping up to the challenges and are committed to making H1N1 Doses Reporting work. Regardless of the option used by their state or territory to report CRA Doses Administered, IIS professionals are involved in this Pandemic Response.

The three options for reporting H1N1 doses administered are:

OPTION 1: For Project Areas collecting data via an existing immunization information system (IIS), aggregate counts may be submitted via three standard data exchange formats.

OPTION 2: For Project Areas collecting data manually, data may be entered directly via the CRA aggregate reporting screen using a web browser.

OPTION 3: For Project Areas using CDC's CRA application to collect patient-level information, selected data elements will be automatically calculated and aggregated.

Of the three options available for reporting most of the IIS community falls into option 1 or 2. Twenty four (24) of the projects are using option 1 and twenty nine (29) are using option 2. Of the 29 using option 2, 12 are still actively using their IIS. The use of options 1 and 2 demonstrate that a significant number of project areas are using IIS to meet their CRA data collection needs. In the last two weeks of October, 100% of the states reported H1N1 doses administered data to CDC. At this time is isn't known what percentage of providers are reporting within the states or how complete these reports are since this is an event that involved reporting from more than just the public sector.

Overall, it is clear that IIS professionals are stepping up to the challenge and in many states, taking on more than just the IIS H1N1 related activities, but also getting involved in call centers, vaccine distribution, provider communications and other H1N1 related activities where their IIS experience has been invaluable.

*Submitted by Katie Reed (HP)*

## **ECBT Teams with New Jersey to Increase Immunization Rates and IIS Participation**

Every Child By Two (ECBT) continues to partner with immunization stakeholders in numerous states to help implement initiatives to improve their immunization rates, particularly through the promotion of the local Immunization Information System (IIS). One such project culminated in *Immunization Update 2009*, a meeting with the goal of educating Essex County, NJ providers about the latest immunization issues and recruiting users on to the NJ Immunization Information System (NJIIS).

Throughout early 2009, ECBT collaborated with partners from Newark's Project Vaccinate, the NJ Vaccine Preventable Disease Program and the Essex Metro Immunization Coalition to develop *Immunization Update 2009*. Approximately 70 immunization providers, school personnel, state and city immunization department staff, and the Vice Chair of the Children's Emergency Medical Fund of NJ participated in the June meeting. Participants discussed several aspects of NJ's Vaccine Preventable Disease Program including the states progressive immunization mandates, which now include influenza and pneumococcal vaccinations for children attending daycare and preschool. New Jersey's new mandates have received much attention by the media and will likely serve as a model for other states considering expansion of school mandates.

H1N1 was also a topic of significant discussion at the meeting as the state continued to prepare for the mass distribution of vaccines in the fall. Attendees were provided a thorough overview of the NJIIS including discussions regarding the many benefits of using the system. Key to the discussion was a testimonial provided by a physician who has benefited from the IIS who encouraged all providers to begin using the system. Related discussions and presentations ensued including vaccine storage and handling and the importance of ensuring that EHRs link to the state's IIS as federal funding for EHRs continues to be allocated by Congress.

A key component of the meeting planning was the development of the *NJ Immunization Handbook*, which was created by ECBT and NJ stakeholders for distribution to all participants and as a future resource for ongoing outreach to providers. The *Handbook* is based on the immunization resource originally created by The Arizona Partnership for Immunization (TAPI) and then adapted by ECBT for Nevada's Immunization Coalitions. It contains five chapters of valuable resources to assist NJ providers in increasing their immunization rates including information such as the latest vaccination rates for NJ, the NJIIS, VFC information, vaccine safety resources and *2009 Immunization Update* presentations. The Nevada version of this resource is available at no charge for adaptation by states by visiting ECBT's site at <http://www.ecbt.org/resources/tools.cfm>

Meeting attendees concurred that both the *Update* and *Handbook* were very relevant and contained practical resources to serve them in their work. Suggestions for future *Update* topics included "How NJIIS Interfaces Work (i.e., benefits to practices, back data and current data entry, and data access)."

NJIIS Recruiter/Trainer, Joann Jablonski, reported that five office practices signed up for NJIIS training as a result of this meeting, whereas she normally signs up one practice a month for a total of twelve per year. All five offices are currently using the IIS. One large office practice in

Essex County also expressed interest in the NJIIS after attending the meeting and is currently investigating the process of downloading their immunization information into the registry.

ECBT will continue to work with our fantastic partners in New Jersey as they consider future meeting topics and initiatives aimed at increasing provider usage of NJIIS and ways to ensure the timely immunization of New Jersey's residents.

*Submitted by Jennifer Zavolinsky and Amy Pisani (ECBT)*

## **AIRA Continues to Inform the National Discussion on Health Information Exchange**

AIRA representative and IIS evangelist Sue Salkowitz has been very busy this fall keeping AIRA in the forefront of national discussions on health information exchange. On November 9 in Philadelphia, Sue presented at the American Public Health Association (APHA) Annual Meeting and Exposition on the Inter-Organizational Agreement (IOA) that AIRA developed in collaboration with the HISPC IOA Collaborative. This document, laying out a standard for interstate exchange of immunization information between IIS, has been very well received and referenced since being released earlier this year.

On November 12 in Hyattsville, Maryland, Sue again presented on behalf of AIRA at the Public Health Data Standards Consortium (PHDSC) Annual Meeting. Sue focused on the readiness of public health systems, specifically IIS, to support "meaningful use" of EHR systems through the exchange of health information. Sue also represents AIRA on the PHDSC Board of Directors.

## **Southeast Regional Forum: A Sharing of Information and Best Practices**

The Southeast Regional Forum took place in New Orleans on November 4, 2009. Like all IIS staff around the country, IIS staff from the southeast region were very busy with H1N1 activities. However, six of the nine states from the region sent staff to the forum; twenty-three people in all attended the forum. IIS representatives came from North Carolina, Florida, South Carolina, Louisiana, Mississippi and Tennessee. In addition to the IIS staff present, there was one AIRA Board member acting as presenter and moderator, four CDC staff, and two AIRA staff.

Topics of this forum covered provider participation, data quality, and interoperability. Presentations on best practices for recruiting and retaining providers to their IIS were made by Brian Moore (TN), Jammie Johnson (NC), and Susan Lincicome (FL). Quan Le (LA) and Brian Moore presented on data quality issues. Quan also presented on IIS interoperability along with Chris Smith (FL). There was a lot of discussion around all these topics and a true sharing of information.

Attendees learned a lot from each other and thought the day was very well spent. If anything, they wished it could be longer so as to cover more topics in more depth. Once again, it was evident that IIS professionals are eager for opportunities to learn from one another and to network with their colleagues. Plans will start up in January 2010 for the next regional forum.

## **IIS Performance Improvement Initiative**

The IIS Performance Improvement Workgroup has been hard at work the past year on a new IIS Performance Improvement Initiative to create a tool IIS can use to:

- assess their current performance with regard to essential immunization program components,
- inform improvement strategies, and
- monitor progress at achieving positive change.

The workgroup members developed standards and indicators to measure those standards in six essential program support components of an IIS: vaccine management, provider participation, epidemiology and surveillance, population assessment, preparedness, and consumer education. These standards and indicators are the basis of a new IIS performance assessment tool.

The next steps for implementation of this new initiative is for IIS from around the country to test the assessment tool, providing feedback to the workgroup on how well the tool helped them in planning improvement strategies. Early results from the test sites will be discussed in an ad hoc meeting at the NIC in April. Please consider volunteering to be a test site for the IIS performance improvement initiative. If you are interested or have any questions, contact Ina Kichen ([ikichen@health.nyc.gov](mailto:ikichen@health.nyc.gov)).

## **Upcoming AIRA Education Activities**

Be on the lookout for information on the following education activities planned for 2010.

- ✓ Webinar on MIROW Chapter 3: *Data Quality Assurance: Incoming Data* – February TBD
- ✓ Webinar on IIS Research and Publishing – March TBD
- ✓ Pre-conference workshops at the NIC – April 18
- ✓ Ad hoc meetings at the NIC
  - MIROW best practice guidelines – April 19
  - IIS performance improvement initiative – April 20
- ✓ Webinar on the new HL7 Implementation Guide – June TBD
- ✓ Regional forum – June TBD

**Deadline for submission of abstracts for the 2010 NIC  
is midnight, December 11, 2009.**

<http://cdc.confex.com/cdc/nic2010/cfp.cgi>

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**SnapShots is produced quarterly by the AIRA Education Committee.**

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