



SNAPSHOTS

Immunization registry news from the American Immunization Registry Association (AIRA)

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 registry. Email us at 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.

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President's Report

This issue of Snapshots focuses on school use of registries. Tom Maerz' article about the Wisconsin experience with school access has valuable information on process and lessons learned. Tom says, "In retrospect, Wisconsin wishes that they had the school access available much earlier as it had such a strong impact on private provider participation." What a statement – and one I want to emphasize. If you have not started working on school access to your IIS, don't wait! It's a great strategy for provider recruitment. School nurses can be great advocates in recruiting providers to participate in the IIS. And providers really appreciate the time savings created when school nurses can look up records in the IIS directly instead of calling the provider. School nurses love it too. As Mary Beth Kurilo points out in her article, school nurses in Oregon have cited significant time savings when they use the Oregon ALERT printout of the school immunization status form.

We have many partners and supporters in the IIS/school effort -- you'll read about Every Child By Two's work with School Administrators to promote connecting with IIS, as well as AIRA's work with other organizations on FERPA-related issues.

On a different note, you'll also find an article written by my Washington colleague, Denise Farrand, about our state registry's health promotion component. This enhanced reminder system is a big part of our CHILD Profile system and something we are very proud of.

I trust you all will find Snapshots as useful and interesting as I do. Best wishes to you all,

Sherry

Sherry Riddick (WA), AIRA President

Wisconsin Immunization Registry Works with Schools and Parents

Tom Maerz , Registry Manager for the Wisconsin Immunization Registry (WIR), shared with us WIR's experiences of working with schools and parents. Wisconsin Immunization Registry, an opt out system that began collecting data in 1999, today contains data from close to 90% of the health care providers in the state. Starting in July of 2002 the WIR system implemented functionality which allowed schools access to the immunization data.

School access to the system requires an annual subscription process completed by the school principal or superintendent. Originally this was a very labor intensive paper process, but it has recently been electronically automated to reduce the burden on the WIR staff. The school principal or superintendent is the party responsible for establishing the account and then, based on their discretion, they can share it with the appropriate staff member(s) responsible for immunization verification. The school is expected to sign a school security and confidentiality agreement.

School access allows for confidential access to basic information on a child, such as the child's name and date of birth, along with the complete immunization history. No address or provider information is made available through this access. In addition to retrieval of the immunization history, the school user can also create school lists based on grade or school graduation year. This allows the school nurse to run, in addition to basic immunization history reports, reminder recall reports for the groups designated by the list. Training is easy and is handled through the user manual or online training modules.

The response to this functionality has been very positive. Wisconsin found that as a result of school access being available, the private provider participation boomed. In retrospect, Wisconsin wishes that they had the school access available much earlier as it had such a strong impact on private provider participation. Private offices were telling the WIR folks that prior to school access becoming available they would spend on average two hours a day during the month of August handling calls about immunization records for schools. Now they do not have to spend any time at all as they can direct the schools to WIR.

In areas with larger school districts such as Madison and Milwaukee, WIR has begun to work with these schools to develop electronic data exchange. Currently WIR can receive data, identify clients that match and provide missing immunizations back to the school. Analysis of this data shows that the school systems have a significant number of immunization records (over 200,000) that WIR does not contain. To determine the quality and validity of the schools' data WIR plans on further analysis over the next six months. Additionally, WIR is working with the CARES program which manages daycare centers throughout the State and will jointly send out reminder/recall notices to children behind on their

immunizations. The **CARES** (Client Assistance for Re-employment and Economic Support) system is a statewide, automated, integrated system that supports the major income maintenance programs of Wisconsin Works (W-2), Food Stamps (FS), Medical Assistance (MA), Food Stamp Employment and Training (FSET), and Learnfare case management program by determining client eligibility, issuing benefits and managing support. Within this unit is a KidsFirst unit that WIR is working with regarding daycares.

Wisconsin also allows public or parent access to their system. Parent access allows a parent to get a complete immunization history along with the ACIP forecast for future vaccinations. No provider or address information is provided. It has been determined that this access helps in terms of back to school events. An example of this is based on an analysis of the number of inquiries during the course of the year. In an average month WIR sees around 14,000 inquiries from the public. For the month of August that number spiked to around 22,000. It also showed a spike back in May at the time of a Measles outbreak. This volume of inquiry strongly suggests that public access has helped to ensure that the immunization record is being accessed for school related reasons.

Looking back, the biggest challenge from WIR's perspective had been managing the manual subscription process. The recent work to automate this process has addressed the issue. From the school nurses perspective, the biggest issue is that it is the principal or superintendent required to subscribe not the nurse. However, over time fewer nurses have voiced this concern. Both the process of annual subscription and the need for the principal or superintendent to be the school's responsible party are legal requirements on the system.

Looking to the future, Wisconsin has major plans to further evolve their school access. Recognizing the two largest challenges presented, working with FERPA regulations and opening up questions on how to work with a totally new data set (e.g. quality, completeness, validity), WIR is implementing a phased approach to overcome and address these concerns.

First, WIR will begin to accept data from schools. Records received from schools will be matched against existing WIR data. Any records submitted by a school that do not match an existing record in the system from a verified source will be "locked" and only be able to be viewed by schools. Providers would not initially have access to this data.

Starting the end of this year, the second phase will begin. The main focus of this phase will be the gathering of FERPA releases from schools, providers or, utilizing the public access, parents to allow for the sharing of this information.

The third phase will occur when these FERPA releases have been collected. This will allow for the full disclosure of all immunizations to schools, public health, providers and parents. Records that have been supplied solely from a school will be flagged or highlighted. This indicates that a school provided this record with no verification from a provider in the system. Providers will have an opportunity to verify this record and remove the flag. Additionally, the flag would be automatically removed when that record is received from another verified source. This is seen by the community as a win/win/win for all. Providers, schools and parents reap the benefits of accessing this larger and ultimately more complete immunization information system.

As this occurs WIR will also explore more opportunities for electronic data exchange with the larger school systems in Wisconsin. At the same time, WIR will expand the current reporting capabilities to include reports for suspension from school and assessment reports. If you are interested in more information on this, you can contact Tom Maerz at Thomas.Maerz@dhfs.wisconsin.gov.

Oregon's Printable School Certificate of Immunization Status Form

Schools and Childcare Centers in Oregon have a new resource to assist them with the School Exclusion process for the 2008-2009 school year. Beginning in August 2008, schools can now print the official Certificate of Immunization Status off of the Oregon Immunization ALERT secure website. The form meets all requirements for school law purposes, and uses the same decision-making in its algorithms for selecting shots (for example, if the child has received 6 DTaP immunizations, only the five most recent doses will appear on the form).

If the CIS form is complete, it can be put directly into the child's file in place of the current handwritten form. If the record is incomplete, the parent or guardian may update the printed ALERT CIS form with any missing vaccine doses and sign the form. Early adopters of the form have been extremely positive about its availability, citing significant time savings through not having to transcribe shots from one form to another. This additional functionality is especially welcome for the 2008-2009 school year, as Tdap and Hepatitis A will both be new requirements.

In addition to the printable CIS form, the State also borrowed a concept from its school law neighbors in San Diego and created and supplies transparent overlays that simplify the process of evaluating CIS forms for completeness and up-to-date status. The overlays are segmented by age group, and provide a visual tool containing shaded boxes to assist school personnel in evaluating the CIS form.

For more information on Oregon's use of IIS data for the printable CIS, or about Oregon's school law, navigate to: <http://www.oregon.gov/DHS/ph/imm/school/index.shtml> or call ALERT Customer Service at 800-980-9431.

Submitted by Mary Beth Kurilo and Stacy de Assis Matthews, Oregon

WA State's Registry Provides Child Health and Safety information to Parents

CHILD Profile, Washington State's Immunization Registry, has a Health Promotion component which functions as a centralized enhanced reminder system for children birth to age 6. The Health Promotion mailings are sent to parents at 17 age-specific intervals with reminders of immunizations and well-child visits due. The mailings are timed to be received 30 days before each AAP-recommended well-child visit, and list the immunizations parents should expect at each visit. The materials also contain information about nutrition, growth, development, safety and other important issues.

Over 45 individual health promotion materials are sent to Washington parents. Materials are:

- based on best practice guidance from professional child health and safety organizations, with extensive input from parents and health professionals;
- developed according to health education theory and comprehensive, formal evaluation;
- updated annually to provide the most current recommendations; and
- written at a 6th grade reading level, and translated into Spanish, to increase their accessibility.

All materials can be viewed and downloaded at www.childprofile.org.

The mailings are initiated from a weekly download of birth certificates. Mailings for children not born in Washington can also begin once a provider or health plan submits demographic information. Language preference is provided via several data sources. Parents may also call to initiate mailings in Spanish.

The Health Promotion component of the system, originally developed in-house, has been redeveloped by current Registry vendor, Scientific Technologies Corporation (STC). The module contains a series of data

quality checks which are performed weekly, including review and correction of incomplete addresses, review of records with a changed language preference, and correction of names to be appropriate for mailing labels. In addition, electronic address updates from the U.S. Post Office are incorporated, along with data regarding child deaths and adoptions, in order to prevent mailing inappropriately to families.

The Health Promotion component also provides up-to-date addresses for children in the Registry and serves as an “early warning system” of potential data quality issues. For example, a pharmacy administering flu shots to adults submitted batch data with the vaccine administration date in the birth date field. Because these patients appeared to be infants, child health mailings were inappropriately sent to adults. The error was quickly discovered by health promotion staff and immediate follow-up was done with the pharmacy to correct the data submitted. In addition, a new data quality report was developed for the Health Promotion module to conduct an automated check of birth date against vaccinations not routinely given at birth.

Currently, 85% of parents of children birth to age 6 are sent the series of mailings, with a goal of increasing to 90%. As of 9/30/08, over 430,000 children under age 6 were on the mailing list, and 1.4 million mailings are anticipated to be sent in 2008, approximately 27,000 each week to children in the age-eligibility range for each of the 17 mailings.

According to statewide satisfaction surveys, parents are highly satisfied with the health promotion materials, and find them useful and relevant. Providers benefit from the immunization and well-child visit reminders parents receive. Children’s health can be maintained and improved through increased communication between parents and providers, as promoted in the materials. The materials are nationally recognized, and endorsed by the WA Chapter of American Academy of Pediatrics (AAP), WA Academy of Family Physicians, and the University of Washington School of Public Health, Maternal Child Health Program.

New initiatives being considered for CHILD Profile Health Promotion include:

- Providing the immunization, well-child, and other child health reminders to parents electronically.
- Mailing to parents prenatally, with immunization and other child health information.
- Mailing to parents for children older than age 6, with a special interest in adolescent mailings.

The Health Promotion component, along with the rest of the program, is funded through a combination of Federal Immunization Grant funds, State General Fund, and Medicaid match. In addition, partner organizations whose materials are mailed through the Health Promotion system pay a small fee to support the system’s infrastructure, in addition to paying for any new assembly or postage expense the insertion of their material incurs.

CHILD Profile staff can be a resource to other states considering use of the STC Health Promotion module or otherwise considering conducting large mailings from your Registry.

Submitted by Denise Farrand, MPA, WA

ECBT Letter to School Administrators

Every Child By Two (ECBT) is disseminating a letter to approximately 14,000 members of the American Association of School Administrators (AASA) to highlight the benefits of connecting schools with immunization information systems (IIS). Amy Pisani, ECBT’s Executive Director, met with AASA President, Randall Collins, who enthusiastically supported our efforts to ease the burden on school nurses

who are tasked with assessing student records to determine immunization status prior to school admission. Mr. Collins offered to include a message regarding his support for the initiative within the President's Column of AASA's January 2009 newsletter, and is eager to conduct ongoing initiatives to help schools take advantage of the data held within IIS. The letter is signed by ECBT Cofounder Rosalynn Carter, President Randall Collins and AASA Executive Director Daniel Domenech, and is accompanied by ECBT's brochure "How Immunization Information Systems Can Help Schools Expedite Immunization Assessments". Schools will be directed to the state health department for more information. To view the ECBT brochure, please visit www.ecbt.org.

Submitted by Jennifer Zanolinsky, ECBT

AIRA Webinar on the FERPA Challenge

On Tuesday, September 16, the AIRA IIS/Schools Capacity Building Work Group kicked off the new school year by hosting an open webinar titled *IIS/Schools Data Exchange and the Challenges of the Family and Education Rights Privacy Act (FERPA)*. We were fortunate to have Dr. John Middaugh, the Director of Community Health for the Southern Nevada Health District, as the keynote speaker. Dr. Middaugh is the Chair of the Public Health Law Committee for the Council of State and Territorial Epidemiologists (CSTE) and has been working on FERPA issues in this capacity.

Kim Salisbury-Keith (RI) presented on AIRA's formal response to the proposed FERPA changes. This document is available at http://www.immregistries.org/docs/FERPA_Changes_Response_FINAL_1.doc. Letty Cherry gave a PowerPoint presentation on how they have addressed the FERPA challenge to schools reporting to the IIS in Riverside County in California; Sherry Riddick gave a presentation on data exchange between schools and the CHILD Profile Registry in Washington State; and Loretta Santilli, newly elected AIRA Board Member, presented on the special functions available in the New York State IIS for school users.

FERPA remains a formidable barrier to data exchange between schools and their state or regional IIS. Over sixty people attended this informative webinar. AIRA will continue to work with IIS programs, our partners and other stakeholders to address this issue. The entire webinar (audio and video) is available at: <https://cc.readytalk.com/play?id=gwn89atn>.

Northeast Region IIS Meet in the Big Apple

AIRA convened its first Regional Forum in New York City on September 24. This one-day meeting brought together IIS staff from across the Northeast Region to network, share information, discuss common issues and set an action plan to help implement interstate data sharing.

Thirty-one people attended the meeting representing Connecticut, Maine, New Jersey, New York City, New York State, Pennsylvania, Philadelphia, Rhode Island and Vermont. Sue Salkowitz started the meeting off with a presentation profiling the Northeast Region and laying out what we need to know to begin implementing interstate data sharing. Two panel discussions were held: *Data Exchange*, moderated by Noam Arzt (HLN), and *Minimum Functional Standards*, moderated by Dorothy Williams (NJ). The afternoon was a discussion facilitated by Sue Salkowitz and Mike Flynn (NYS) on developing a common interstate data sharing Memorandum of Understanding (MOU) that all the Northeast states could use.

The Northeast Regional Forum was a success and AIRA is currently in the process of planning a similar meeting in the Midwest.

AIRA Center of Excellence Award – *Start planning now!*

Once again AIRA will present their Center of Excellence Award at the opening plenary of the National Immunization Conference (March 30 through April 2, 2009). This award acknowledges the achievements of an IIS project that used their data in a unique way to support the work of their Immunization Program. We encourage you to start looking now at the ways you use the data in your IIS and think about sharing your best practices with your IIS colleagues. The Center of Excellence Award winner will have their submission posted on the AIRA web site and have an opportunity to share their experience on an open information conference call or webinar.

The call for nominations for the Center of Excellence Award will go out at the beginning of January. You will get an announcement and the information will be posted on the AIRA web site.

NIC Abstracts Due

Don't forget to submit an abstract for the upcoming NIC in Dallas. It is so important as we evolve as IIS systems and further integrate with our partners in public health to share with the community the exciting work that is being accomplished. This is a great opportunity to share, learn and grow. Details on submitting an abstract and other information about the conference can be found at:

<http://www.cdc.gov/vaccines/events/nic/default.htm>.

Immunization Information Systems 101: What Every Manager Should Know

CDC's Immunization Information Systems Support Branch has, in partnership with immunization grantees and stakeholders, has developed a web-based education module with entry-level information about immunization information systems (IIS). This module will serve as a reliable, up-to-date source for ground-level training and orientation within the IIS community. It is intended for use primarily by those new to IIS such as new immunization program and IIS managers, programmers, immunization program staff, and their partners who may use IIS. In addition, the module can be used to educate immunization providers and new partners on the basic principles and functions of IIS. Continuing education credits will be provided. For more on IIS101 visit our website at <http://www2a.cdc.gov/vaccines/ed/iis/>. For more information contact Bobby Rasulnia at bba9@cdc.gov.

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