

Immunization Initiatives Update June 2009

Our June topic is IIS or Immunization Registries.

Between August and October of 2008, immunization initiative staff at MCN conducted structured interviews with all State Immunization Coordinators or their designated contact persons in an effort to identify state programs that address the immunization needs. In response to the question “does your state have an electronic immunization registry?” we found that 42 states have registries, six states are in the process of implementing them, and two states do not have registries. Out of 42 states with registries, 37 are in both public and private settings and 31 are “birth to death” registries, including both children and adults. To view report, go to: <http://www.migrantclinician.org/toolsource/resource/interviews-state-programs-addressing-immunization-needs.html>

We offer three articles that discuss the progress of using immunization registries to improve recording and access of immunization data. Click on the links below to access the full articles.

Immunization information systems progress--United States, 2006.

MMWR Morb Mortal Wkly Rep. 2008 Mar 21;57(11):289-91

A CDC program goal for 2010 is to achieve 95% participation in an immunization information system (IIS) (defined as having two or more recorded vaccinations) among children aged < 6 years. IISs, previously known as immunization registries, are confidential, computerized information systems that collect and consolidate vaccination data from multiple health-care providers, generate reminder and recall notifications, and assess vaccination coverage within a defined geographic area. Most IISs have additional capabilities, such as vaccine management, adverse event reporting, maintenance of birth-to-death vaccination histories, and interoperability with other health information systems. IISs can provide accurate data on which to make informed vaccination decisions and better protect against vaccine-preventable diseases. This report highlights selected data from CDC's 2006 Immunization Information System Annual Report (IISAR), a survey of grantees in 50 states, five cities, and the District of Columbia that receive funding under the Public Health Service Act. The data indicated that 65% of all U.S. children aged < 6 years (approximately 15 million children) participated in an IIS in 2006, an increase from 56% in 2005. The majority of grantees (70%) reported that their IISs have the capacity to track vaccinations for persons of all ages. Data on vaccinations were entered within 30 days of vaccine administration for 69% of children aged < 6 years. However, results for certain data completeness measures were low. These findings underscore the need to continue to address challenges to full IIS participation and ensure high-quality information.

For the full article, go to:
<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5711a4.htm>

The Regional Immunization Registry as a Public Health Tool for Improving Clinical Practice and Guiding Immunization Delivery Policy

Allison Kempe, MD, MPH, Brenda L. Beaty, MSPH, John F. Steiner, MD, MPH, Kellyn A. Pearson, MSN, N. Elaine Lowery, JD, MSPH, Matthew F. Daley, MD, Lori A. Crane, PhD, MPH, and Stephen Berman, MD Am J Public Health. 2004 June; 94(6): 967–972.

OBJECTIVES: We assessed the distribution of immunization records among 3 health care delivery sectors and the impact of a regional immunization registry on “up to date” rates. **METHODS:** Immunization registry records in 2 regions were categorized as having originated in private practices, community health centers, or public health clinics. “Up to date” rates were calculated after we sequentially added immunization records from the 3 sectors. **RESULTS:** The percentage of children with immunizations documented in multiple sectors increased with age from 7 to 24 months, and children who were seen in multiple sectors were more likely to be up to date. There were relative increases in “up to date” rates of 50% for children aged 24 months. **CONCLUSIONS:** The regional immunization registry is a powerful public health tool for increasing documented “up to date” rates and providing insights into patterns of immunization delivery.

For the full article go to:
<http://www.pubmedcentral.nih.gov/articlerender.fcgi?tool=pubmed&pubmedid=15249300>

Qualitative study of clinic staff members' experiences using an immunization registry

Wells KJ, Holmes AK, Kohler SA, Rust CT, Rask KJ. Arch Pediatr Adolesc Med. 2000 Nov;154(11):1118-22. PubMed PMID: 11074853.

Introduction: AN IMMUNIZATION registry is defined as “a computerized database that gathers immunization information on all children . . . in a population defined by a specific geographic area or a health maintenance organization enrolment.”¹ Health care providers can use immunization registries to consolidate scattered records,² provide an immunization needs assessment for each patient, provide current immunization recommendations, promote automated recall of underimmunized children,

document immunizations for schools, preschools, and camps, help manage vaccine inventories, and provide practice-based immunization coverage assessments.³

Despite the proliferation of immunization registries, little research has evaluated the experiences of using an immunization registry as perceived by clinic and office staff. Bordley et al⁴ identified challenges to registry implementation in private practice through focus groups with pediatricians, family physicians, and office managers. These challenges include concerns regarding double entry of data, slowing of patient flow, staff time used for data entry, disproportionately high costs for small practices with limited staffs, and high staff turnover.⁴ In one survey, 60% of pediatricians, 47% of family physicians, and 77% of registered nurses and nurse practitioners stated that immunization registries represented the “best chance to solve the documentation problem.” However, respondents who were familiar with their local registry were less likely to believe that registries would solve documentation problems and more likely to believe that registries were not yet of practical value.⁵

The perceptions of provider site personnel who interact with a registry are important because any successful registry must have both immunization and demographic records entered accurately and in a timely manner. This information is also important for health care providers who currently participate in a registry or who are considering participation. The specific aims of this study are to: (1) examine individual clinic staff members' experiences with using an immunization registry; and (2) compare staff members' perceptions of registries across different provider sites. This study is an important first step in identifying what registry users perceive as important factors related to using immunization registries and can be used to design effective interventions that improve registry use.

For the full article go to: <http://archpedi.ama-assn.org/cgi/content/full/154/11/1118>