The Michigan Care Improvement Registry (MCIR) sentinel site,

February 2008

See <u>http://www.cdc.gov/vaccines/programs/iis/activities/sentinel-sites.htm</u> to learn more about the sentinel site program

Key facts about the MCIR (see also <u>http://mcir.org/</u>)

Years in operation	Since Feb. 1998
Ages	Birth to death (was <20y before June 2006)
Population	130,000 in birth cohort; 10 million total
Racial & ethnic distribution (age <6y)	81% white, 14% black, 5% other/mixed;
	4% Hispanic
Software platform	Oracle 10g database

The MCIR is a mature and well-populated immunization information system (IIS). It has high participation by health care providers, who have realized that using the MCIR saves time for them. The MCIR has 6 regional offices, which facilitates outreach to health care providers by MCIR staff.

Key facts about Michigan's IIS sentinel area	
Participation since:	1 st quarter, 2001
Geographic area	2/3 of population; entire state, except Oakland, Wayne, & Detroit
Annual birth cohort	85,000
Racial & ethnic distribution (age <6y)	85% white, 9% black, 6% other/mixed; 7% Hispanic
0-10 year olds with 2+ iz. recorded	106% (exceeds 100% due to migration)
11-18 year olds with 2+ iz. recorded	95%
Number of provider sites enrolled	1610
% provider participation	92.3% of above sites reported 1+ iz. from 1 Jul. to 31 Dec. 2007
Timeliness of data entry	96% of iz. given in 2007Q4 to children <6y were entered within 30d of administration, excluding historical data

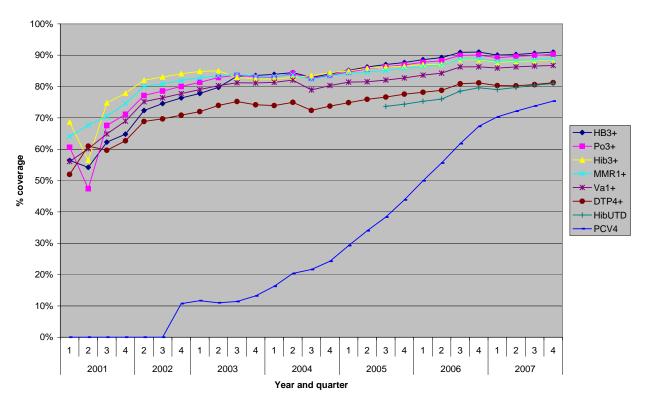
When Michigan began participating in CDC's IIS sentinel site program in early 2001, the sentinel area covered 3 of Michigan's 84 counties. In quarter 3 of 2004, we expanded the sentinel area to cover half of the state's population. In the 1^{st} quarter of 2007, the sentinel area was further expanded to 2/3 of the population (much of the Detroit metropolitan area was excluded). We anticipate expanding the sentinel area to cover the entire state.

Two manuscripts are currently being written; one on Tdap vaccine uptake and another on immunization exemptions. Past publications include:

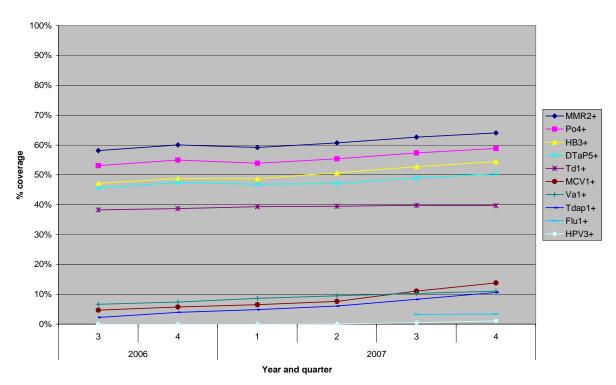
- Enger KS, Stokley S. Meningococcal conjugate vaccine uptake, measured by Michigan's immunization registry. J Adolesc Health 2007; 40 (5):398-404.
- Allred NJ, Stevenson JM, Kolasa M et al. Using registry data to evaluate the 2004 pneumococcal conjugate vaccine shortage. American Journal of Preventive Medicine 2006; 30 (4):347-50.

The next page contains immunization coverage measures from Michigan's quarterly sentinel site reports.





Measures of childhood immunization coverage in the sentinel area have steadily increased since 2001. Temporary decreases in coverage occurred when the area was expanded in quarter 3 of 2004 and in quarter 1 of 2007. Recent levels are about 5 percentage points



Adolescent immunization completeness measures, 16-18y, MCIR

below NIS estimates.

Although data are less complete in older adolescents, the MCIR still contains much useful information, and data quality is improving. Adult data are scant, but this will improve with time & outreach.