

## 2008-2012 IPOM IIS and IIS-related Program Activities

The table below is a consolidated list of IIS-related IPOM required and recommended activities. The table is intended as a tool for Grantees in benchmarking future IIS program planning and enhancements activities.

To view the full version of the 2008-2012 IPOM, go to the site: <http://www.cdc.gov/vaccines/vac-gen/policies/ipom/default.htm>

Chapter	Section	Activity
<b>Required Activities</b>		
Program Planning & Evaluation	1.1b	Facilitate the electronic exchange of immunization data between tribal and/or IHS facilities and state IIS.
Immunization Information Systems	3.1a	Annually increase the percentage of children under six years of age in a fully operational IIS.
Immunization Information Systems	3.2a	Use IIS data to assess the immunization coverage by provider practice and geographic area.
Immunization Information Systems	3.2b	Use IIS data to assess the percentage of public and private provider sites participating in the IIS.
Immunization Information Systems	3.2c	Evaluate IIS data to measure progress in (1) provider recruiting and training efforts at the regional, health district, or county level, (2) frequency of provider submissions of data, (3) completeness of provider submissions, and (4) provider use of specific IIS features.
Immunization Information Systems	3.3a	Participate in CDC national IIS data queries such as new vaccine uptake, data quality measures, etc.
Immunization Information Systems	3.4a	Develop an ISD-approved two-year business plan to ensure reaching the IIS program goal.
Immunization Information Systems	3.4b	A previously submitted and approved business plan must be referenced and updated.
Immunization Information Systems	3.5a	Evaluate IIS data to assess progress with meeting the 12 functional standards of operations.
Provider Quality Assurance	4.2	Work with IIS team to develop a methodology to use the IIS to assess immunization coverage rates.
Perinatal Hepatitis B Prevention	5.3g	Evaluate the administration of a universal birth dose of hepatitis B vaccine by reviewing the annual NIS rates, assessing universal birth dose administration during routine hospital record reviews, and/or analyzing the birth dose data in an IIS.
Perinatal Hepatitis B Prevention	5.4a	Work on a plan to establish a universal reporting mechanism (e.g., newborn metabolic screening card, electronic birth certificate, IIS) for HBsAg test results of pregnant women for all births for those states without such mechanisms.

Perinatal Hepatitis B Prevention	5.5	Work with hospitals to achieve universal birth dose coverage and documentation of the birth dose in an IIS.
Adolescent Immunization	6.2b	Train new VFC providers and their staff regarding procedures for vaccine inventory control, ordering adequate supplies, vaccine storage and handling, administration techniques, documentation, participation in IIS, and other related issues.
Population Assessment	10.1a	Consider at least one other data source to annually identify trends in coverage and subgroups of under-immunized children.
Population Assessment	10.1c	Consider at least one data source to monitor trends in coverage and subsets of under-immunized adolescents and teenagers.
<b>Recommended Activities</b>		
Program Planning & Evaluation	1.2b	As part of the submission of the continuing grant application for 2009, grantees will submit their proposed evaluation focus, and their list of stakeholders. Evaluations should focus on one or more of the following program components: childhood immunization, adolescent immunization, adult immunization, education/training, IIS, perinatal hepatitis B, population assessment, provider quality assurance, surveillance, and vaccine accountability and management.
Immunization Information Systems	3.1b	Develop a plan for increasing participation of children <18 years of age in an IIS.
Immunization Information Systems	3.1c	Develop a plan for increasing participation of children >18 years of age in an IIS.
Immunization Information Systems	3.2d	Use IIS data to generate grantee management reports.
Immunization Information Systems	3.3b	Conduct an evaluation of IIS data generated by a pandemic influenza exercise or a public health emergency such as Hurricane Katrina.
Immunization Information Systems	3.6a	IIS funded through ISD, like all systems funded through CDC grants, contract and cooperative agreements, must comply with the Public Health Information Network (PHIN) standards and specifications.
Provider Quality Assurance	4.2	Work with IIS team to develop a methodology to use the IIS to assess immunization coverage rates.
Provider Quality Assurance	4.2a-d	<ul style="list-style-type: none"> <li>a. Continually assess reliability and use of IIS data. Develop a quality improvement initiative once gaps are identified to improve data.</li> <li>b. Begin discussions with IIS staff regarding possible benchmark and/or assessment reports that can be generated from the IIS.</li> <li>c. Once the methodology is drafted, consider running a pilot to assess functionality and implementation of IIS coverage assessments.</li> <li>d. Incorporate methodology into the VFC/AFX site visit and reflect the methodology in the written AFIX Standards Policies.</li> </ul>

Adolescent Immunization	6.1d	Promote awareness of and participation in IIS among health care providers, especially those who are participating in the VFC program.
Adolescent Immunization	6.1e	Consider, if not previously addressed, the expansion of jurisdiction/state IIS to include data collection for adolescents.
Adult Immunization	7.1	Work with partners (e.g., Quality Improvement Organizations, medical professional societies, hospital infection control nurses) to promote the adoption of evidence-based approaches to increasing vaccination such as the use of immunization information systems (IIS) for client and provider reminder/recall, standing orders, assessment/feedback in settings including hospitals, long-term care facilities, and outpatient clinical settings.
Education, Information, Training, and Partnerships	8.3dd	Maintain a communication system to address vaccine safety issues and controversies, including media and CDC or FDA statements. Use the communication system to disseminate vaccine safety information.
Epidemiology and Surveillance	9.1d	Ensure availability of written up-to-date guidelines for case investigation, outbreak investigation, and outbreak control of all VPDs. In program areas where an IIS is operational, incorporate the use of IIS into case investigation guidelines when documenting the vaccination status of cases and controls.
Population Assessment	10.2d	For areas where IIS are available, consider integrating school and child care center vaccination data with the IIS.
Population Assessment	10.1e	Estimate program-wide immunization coverage of children who turn age 2 years during a 1-year period, using a CDC-approved follow-back survey method.
WIC-Immunization Linkage	11c	As part of the screening and referral process, promote and facilitate the utilization of the IIS to access WIC-enrolled clients' immunization records and to conduct direct data entry. when vaccinations are administered on site. Ensure that staff utilizes the IIS to verify that shots have been recorded and enters missing data into the IIS when applicable.
WIC-Immunization Linkage	11d	Offer incentives to WIC staff for implementation of immunization-promoting activities as well as WIC clients who are up-to-date and/or whose up-to-date immunization records are entered into the IIS.
WIC- Immunization Linkage	11f	Offer training on a regularly scheduled basis as needed to WIC staff. Training may include information on immunization; how to interpret the ACIP schedule and client records; VPDs; how to utilize the IIS for screening, referral, and data entry; and open question and answer sessions.

This document can be found on the CDC website at:

<http://wwwdev.cdc.gov/vaccines/programs/iis/downloads/iis-ipom-activities-2008.pdf>