

11-01

STATEMENT OF POLICY

Immunization Information Systems

Policy

Immunization has been one of the most successful and safest public health measures available to populations worldwide, with an unparalleled record of disease reduction and prevention^{1,2}. Successful public health immunization programs rely on having adequate data to manage the multiple components inherent to such a program. Immunization data can help address health equity by ensuring data is captured on race and ethnicity to identify priority populations and address gaps in services and resources and increase vaccine equity³. Immunization information systems (IIS), also known as immunization registries, are confidential, population-based, electronic databases that can record all immunization doses administered by participating providers to persons residing within a given geopolitical area.

Immunization registries have become increasingly important to facilitate collaboration and communication between vaccinating providers and to inform public health work. The National Association of County and City Health Officials (NACCHO) supports the standardization and consistent use of IIS and requests that the federal government fund the expansion and linkage of this important tool.

NACCHO strongly urges the federal government to:

- Create a standard, interoperable system allowing for information exchange between state and local-level immunization registries and between all pertinent local users, including, but not limited to, local health departments, healthcare providers, and pharmacists.
- Encourage the negotiation of data exchange agreements to allow for interoperability between states or localities with immunization registries, as well as immunization registries at the federal level (i.e., those via the Department of Veterans Affairs and TRICARE, the Department of Defense's health insurance program).
- Ensure that the connections and capacities between local and state registries, and between local users and the relevant registries, meet all requirements of each stage defined as “meaningful use”.
- Ensure electronic medical records/health records are updated and developed to upload immunization data directly into the state registry.
- Ensure local health departments have access to IIS and available data.
- Ensure that states’ education databases are updated and capable of uploading immunization data directly into the state registry.
- Ensure local input when establishing uniform standards for the diverse array of existing registries.
- Ensure local input when developing laws and policies to facilitate exchange of data.



- Assist with policies and technological components to support future international information exchange.
- Assist with the development of laws and policies, which require immunization providers to report and exchange data between education, public health, and medical care providers and systems, including immunization coalitions as appropriate.
- Assist with policy and funds to enable timely and bi-directional exchange of data between IIS, electronic health records, and school immunization registries.
- Provide dedicated and sustainable financial support for the technology upgrades and technical maintenance necessary for continued local participation in IIS.

At the local level, NACCHO urges federal and state governments to support the following:

- The ability of local health departments to exchange information within and across state and local levels.
- Appropriate technology for local health departments to receive, record, and transmit immunization data.
- The ability of local health departments to employ staff with the technological skills required to manage registry operations locally, nationally, and internationally, as applicable.
- The ability of local health departments to employ staff with the technical and epidemiologic skills required to effectively analyze data to formulate an appropriate local public health response.
- The ability of local health departments to collect race/ethnicity data within the IIS to more effectively identify and address racial gaps and inequalities in vaccination services.
- The ability for school, healthcare, pharmacy, and local public health personnel to effectively use IIS.
- The use of IIS to include results of tuberculosis (TB) and lead testing, where appropriate, especially in jurisdictions where school entry requirements include both immunization and TB test results.
- Ensure ease of IIS functioning for mitigating vaccine preventable disease outbreaks, to facilitate targeted response efforts.

Justification

The achievement and maintenance of appropriate immunization levels across the lifespan requires assessment and monitoring of vaccination coverage rates in the population^{1,2}. Given the mobility of the American populace in terms of geography, insurance coverage, and use of medical care, it is imperative that interoperable and coordinated local and state-level IIS are supported by the federal government as part of a larger effort to adopt and support the use of health information technology and electronic health records.⁵ This support needs to be sufficient for the registries to meet the current and planned expansion of the definition of meaningful use at all times. In addition, it is important in an increasingly global world that IIS begin to prepare for the possibility of international immunization data exchange.⁶ The Guide to Community Preventive Services recommends the use of IIS based on strong evidence of effectiveness in increasing immunization rates.⁷

Additional benefits of IIS include the following:

- Generating reminders for on-time vaccination and preventing missed opportunities to administer vaccines.
- Avoiding unnecessary vaccination due to incomplete or missing vaccination records.
- Improving disease surveillance, outbreak, and emergency response at the state and local levels.
- Creating and consolidating comprehensive immunization histories which will therefore develop linkages across vaccination provider types and settings.
- Identifying underserved communities or populations.
- Identifying under-immunized children and facilitating the recall of those not fully immunized.
- Linking immunization records not only within jurisdictions, but also across the country and internationally.
- Assessing population data on access to vaccines and inequities in coverage in a changing medical care environment.
- Assisting with vaccine ordering and inventory management.

Public health immunization services are primarily provided at the local level. Federal support with funding, policies, and legal changes that promote the use of IIS will assist local health departments and their state and local partners in their efforts to prevent threats posed by vaccine-preventable diseases.

References

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Record of Action

Proposed by NACCHO Immunization Workgroup

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