Clinical Tools of the West Virginia State Immunization Information System For Improving Vaccination Rates



Kristen Thompson West Virginia State Immunization Information System Trainer West Virginia Immunization Summit June 10, 2022



Agenda

- Improving coverage rates/Reminder Recall
- Covid 19 Vaccine Dose Administered Report
- Data Quality Reports/Patient Data Quality Detail
- Vaccine Need Report
- Vaccine Ordering Process
- Medical Exemption Module
- Helpful Tools /Document Center
- Resetting Your Password
- Editing Patient Demographics
- Editing The Time/Date For An Order
- Valuable Websites
- Reminders
- Contacts



Reminder Recall



- Important tool for targeting patients in need of specific vaccinations
- Ability to generate a patient list, mailing labels, postcards, or form letters
- Vaccines For Children (VFC) providers are asked during Assessment, Feedback, Incentives and Exchange (AFIX) visits if it is being utilized

Reminder Recall (cont'd)



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	000	ind	Orl		
	enn	IIIU	er/	I LE	Call

How do you want to run this Reminder/Recall?

-1

 For all patients you own For all patients you have Include Inactive Patients 	n ve seen at your facility ts (Excluding deceased)	
Due Date Timeframe:	Due Now	-

Who do you want to Contact?
Patient Location: TEST SITE (69803) × • TEST SITE1 × • Organization (IRMS) Group • • Patient Age Range # of Select • # of Select • Patient Birth Date Patient Gender Limit To Exclude patients who were sent a notification in the last: # of • Days • Weeks • Months • Years
Advanced Which vaccines would you like to include? Select a series
I only want to see my patients who are: ✓ Due for all selected vaccines One dose away One visit to complete the series

Reminder Recall (cont'd)



Reminder/Recall 1 2									
What patients do you want to add to your recall group?									
Remove	Patients who	don't have an a	availal	ble					
Name	Phone	Address	Emai	I					
Remove	Patients who	have received	more	than Sel	ect · notifications.				
									_
	Last	First	Age	Vaccines Due	Available Contact Methods	R/R Attempts	Reason fo	or Inactivation	
	¢	•	¢	¢		¢			
	TEST	TOMMIE	15	10		0	Select		▼



Reminder Recall (cont'd)



Click 'Generate a Patient List' or other recall method and follow instructions
 Reminder/Recall
 1
 2
 3



What do you want to do with your selected recall group?



Generate A Patient List







Print Labels

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	-)
/	EV.

Print Letters

_	

Create Custom Post Cards



Save As a Patient Group (Cohort)



Generate Auto-Dialer Content



Create Avery 8387 Postcards



Send Email

COVID 19 Vaccine Doses Administered



AW SEMPER	Maccingtian Tatala Deport	
	Vaccination Totals Report	
⊿ Main	Include Historical Vaccinations	
Home	Limit Report By	
Logout	Organization	✓
Select Application	 Organization Group 	select V
Select Organization	 Do Not Limit 	
Select Facility	Facility	
Select Pin	O Do Not Limit	
Document Center	PIN	select V
Help	Vaccination VEC Status	select V
MyIR		Unselected
Dashboard		COVID-19, mRNA, LNP-S, PF, 30 mcg/0.3 mL dose
Message		COVID-19, mRNA, LNP-S, PF, 10 mcg/0.2 mL dose, tris-sucrose
Favorites		COVID-19 vaccine, vector-nr, rS-Ad28, PF, 0.5 mL
∡ Patient		Hep B, adolescent or pediatric
Search/Add		Hib (PRP-OMP)
Waiting Room	Vaccines	Add 🔻 Remove 🔺
Demographics		Selected
Remote Registry		COVID-19, mRNA, LNP-S, PF, 100 mcg/ 0.5 mL dose
Manage Population		
Waitlist		
✓ Vaccinations		
View/Add		5 04/04/0000 Through 04/20/2020
Forecast	Vaccination Dates	From: 04/01/2022 Inrough: 04/30/2022
Summary	O Patient Age Range	From:select V Through:select V
Oral Health Service	 Patient Birth Date 	From: mm/dd/yyyy Through: mm/dd/yyyy
Exec. Dashboard	Do Not Limit	
▶ Lead	Sex:	select V
▲ Organization	District/Region	select V
Search/Add	Display By	
Search Results	All O Half Hour O Hour O Day	
Detail	 Total Vaccinations by Organization Group 	
Group Management	Total Vaccinations by Organization	
∡ Facilities	 Total Vaccinations by Facility Group 	
Search/Add	 Total Vaccinations by Facility 	
Search Results	O Total Vaccinations by Vaccinator	
Detail	Total Vaccinations by Program	
Physicians &	Total Vaccinations by Health Plan	
Vaccinators	Total Vaccinations by Zip Code	
Lot Numbers	Total Vaccinations by State	
Orders/Transfers	Total Vaccinations by Oracle Total Vaccinations by County/Parish	
Dashboard Reports	Total Vaccinations by Octanyin ansi Total Vaccinations by District/Region	
∡ Reports	Total Vaccinations by District Vaccine Total Vaccinations by Vaccine	
Patient Record	O Total Vaccinations by vaccine	
Report Module		Back Reset Create Report
State Reports		
Mgmt Reports		
School Reports		

COVID-19 Vaccine Doses Administered (cont'd)

		Vaccination Totals	
Report Criteria			Report Date: May 12, 2022
Organization:: Facility: Report Type: Display By: Include Historical Vaccinations: Vaccination VFC Status: Vaccines: Vaccination Date Range: Birth Date Range: Patient Age Range: Sex: District/Region: Age Group:		by Organization All Yes All COVID-19, mRNA, LNP-S, PF, 100 mcg/ 0.5 mL dose 04/01/2022 Through: 04/30/2022 All All All All No	
Total Vaccinations Selected: 1	042		
	Organization	Number of Vaccinations	Percent of Total Selected
		1042	100

WEST VIRGINIA Department of Health

Data Quality Reports



- Patient Data Quality Detail Report
- Vaccine Need Report

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Patient Data Quality Detail

- Used to enable identification of patient records with incomplete information
- Limited to variables selected by the user such as:
 - VFC Status
 - Patient Address
 - Guardian Information
 - Patient Race

Vaccine Need Report



- May be used to assess VFC vaccine ordered for the previous year
- Information can assist provider in completing the annual VFC report

Vaccine Need Report (cont'd)



- To Create This Report
 - Go to Reports → State Report
 - Click on 'Vaccine Need'
 - Specify the Period Begin Date
 - Click on 'Create Report' and the report will open in a new screen

Vaccine Need Report (cont'd)



State Reports	
Certificate of Immunization	Provisional Certificate of Immunization
Blank Form	Blank Form
Current Patient's Form	Current Patient's Form
Vaccine	For Children (VFC)
Vaccine Need	
VFC Vaccine Order Form	VFC Vaccine Order Form (Blank)
Provider Activity (Summary)	Schedule
Provider Activity (Detail)	Schedule
Publicly Supplied Vaccines Nearing Expiration	Schedule



Vaccine Ordering Process

- Three Step Process In Ordering Vaccines
 - Reconciliation

- Placing The Vaccine Order
- Receiving Order

Reconciliation



Reconcile Inv	entory									
Vaccine	Lot Number	Exp Date	Quantity on Hand	Physical Inventory	Adjustment (+/-)	Category	Reason	Public	Inactive	Add Row
DT (Pediatric)	C4161AA	10/27/2014	2		0.0	No Category Required 💌	No Reason Required 💌	Y		+
DTaP	AC14B157BA	09/13/2014	2		0.0	No Category Required 🔻	No Reason Required 💌	Y		+
DTaP	AT57M	06/19/2016	10		0.0	No Category Required 💌	No Reason Required 💌	Y		+
DTaP	C4535AA	07/10/2016	10		0.0	No Category Required 💌	No Reason Required	Y		+
DTaP/Hep B/IPV	2G437	07/01/2016	10		0.0	No Category Required 💌	No Reason Required 💌	γ		+
DToD/Hon										\frown

Placing an Order



Create Order					
Organizatio			First Na	me:	
Facility: BF			Middle	Name:	
Phone Numi			Last Na	me:	
Phone Exter			Address	5:	
Eman.	MART.STRICKEN@WW	OWEDIGINE.ONO	State:		
			Zip:		
Monday:	09:00 🗸	17:00 🗸	Tuesday	/: 09:00	✔ 17:00 ✔
Wednesday:	09:00 🗸	17:00 🗸	Thursda	ay: 🗌 09:00	✓ 17:00 ✓
Friday:	09:00 🗸	17:00 🗸]		
PIN: 409005			Instruct	ions: ####M, W, TH, T, F	; MWTHF
Order Date: 05/05/	2022		Order St	tatus: In Progress	
Submitter:)			
Comments:					
Inventory Last Sub	mitted: 04/28/2022				
Last Order Submittee	1: 04/28/2022 04:13:08 PM				
Order Set:	COVID PEDIATRIC PFIZE	R / Distributor 🗸			
Order Frequency:	Monthly Order Timing:				
Order Schedule:					
Order Details					
Vaccine	Vaccine Name	Funding Source Used Last Month	Physical Order Inventory Quantity	Urgent Priority Reason	Comments
COVID-19, mRNA, LNP-S, PF, 10 mcg/0.2 mL dose, tris-sucrose	COV-19 PEDIATRIC (Pfizer) MDV10 (Pfizer PEDIATRIC) 10 Pack (100 doses per pack)	PAN 0 0		□select ✓	
				Cancel	Save Order Submit Order

Receiving Order



11-1-	Current Order	/Transfer List				
(Main	Inbound Order	rs				
Home	Select	Order Number	PIN	Submit Date	Approval Date	Status
Select Application	>	230949	310501	12/04/2020	12/04/2020	Approved
Select Organization	>	231646	310501	12/11/2020	12/11/2020	Approved
Select Facility	>	231969	310501	12/18/2020	12/18/2020	Approved
Select Pin	>	232106	310501	12/24/2020	12/24/2020	Approved
Document Center	>	232107	310501	12/24/2020	12/24/2020	Approved
Help	>	232246	310501	12/28/2020	12/28/2020	Approved
Dashboard	>	232726	310501	12/31/2020	12/31/2020	Approved
Message	>	232727	310501	12/31/2020	12/31/2020	Approved
Favorites	>	234889	310501	01/06/2021	01/06/2021	Approved
Patient	>	235286	310501	01/07/2021	01/07/2021	Approved
Waitlist	>	235287	310501	01/07/2021	01/07/2021	Approved
Vaccinations	>	236126	310501	01/14/2021	01/14/2021	Approved
Oral Health Service	>	236306	310501	01/14/2021	01/14/2021	Approved
Exec. Dashboard	->	236986	310501	01/21/2021	01/21/2021	Approved
Lead	>	237069	310501	01/21/2021	01/21/2021	Approved

Medical Exemption Module



- All medical exemptions must now be requested through WVSIIS
- Ability to track patients exempt from a specific antigen in case there is an outbreak
- The state immunization officer will either approve or deny the medical exemption online through WVSIIS

Medical Exemption Module (cont'd)



 You should get a confirmation that the request was submitted successfully

Medical Exemption Request for the patient is submitted successfully

- Request will be evaluated by the state immunization officer. Then, the guardian and provider will be notified of determination
- Please contact Lara Sitler at <u>Lara.I.Sitler@wv.gov</u> for further information

Helpful Tools



Document Center

ANI SEMPER UN		
A COLUMN STATE	Document Center View	
🖌 Main		
Home		View/Download
Logout		View/Download
Select Application	Mass Immunizations User Manual	View/Download
Select Eacility	Viewer's Guide	View/Download
Select Pin	Pharmacy Quick Reference Guide	View/Download
Document Center	School Nurse Module	View/Download
Help	PHC Hub Guide	View/Download
MyIR	HL7 Guide	View/Download
Dashboard	Medical Exemption Guide	View/Download
Message	Guide to Contraindications	View/Download
Patient	New User Enrollment Form	View/Download
Waitlist	Provider Agreement	View/Download
Vaccinations	2020 Updated Vaccine Cheatsheet with CVX codes	View/Download
Oral Health Service		
Exec. Dashboard	UGM 2019 IMMUNIZATION SECTION	
Lead	UGM 2019 Immunization Section	View/Download
Organization		
▲ Facilities	UGM 2019 VACCINE for Children Section	View/Deumland
Search/Add	UGW 2019 Vaccine for Children Section	View/Download
Search Results	SSO readiness	
Physicians &	How to be ready for Single sign on	View/Download
Vaccinators		



Resetting Password

- Will not accept the last five passwords used
- Use forget password link
- Check spam for the password reset link
- Make sure your correct email address is in WVSIIS

OF WEST URP TO THE TURNED OF THE TOP TO THE TOT TO THE TOP TO THE TOT TO TOT TO THE TO TOT TO TOT TO TOT TO TOT TO TOT TO TO	
() USERNAME	
PASSWORD	
LOG IN	
Forgot Password?	

Helpful Tools (cont'd)



Go to Patient Demographics, select "EDIT"

	+ -							
⊿ Main	Patient Demogra	phics						
Home	Record Info	Record Info						
Logout	SIIS Patient ID:		6382861					
Select Application	Organization Owne	er.	69566 - WVF	HHR				
Select Organization	Eacility Owner:		36508 - EPIDEMIOLOGY INFECTIOUS DISEAS					
Select Facility	Entry Date:		05/05/2022		Last Update:	05/05/2022		
Select Pin	Patient Status							
Document Center	State Level:		Inactive		Organization Level:	Active		
Help	County Level:		Inactive					
MyIR	Patient							
Dashboard	First Name:		MINNIE		Race:			
	Middle Name:				Ethnicity:			
- Fovoritor	Last Name:		MOUSE		Language:			
Favorites	Suffix:				SSN:			
▲ Patient	Birth Date:		11/18/1928		Medicaid #:			
Search/Add	Birth File #:				Multi Birth Indicator:	N		
Demographics					Birth Order:			
Remote Registry	Age:		93 yrs		Military:			
Manage Population	Reminder/Recall P	ublicity			Recall Attempts:	0		
▶ Waitlist	Code	Code						
▲ Vaccinations	Sex:		FEMALE		Nationality:			
View/Add	Mother Maiden Nm	1:		Passport #:				
Forecast	VFC status:		Ineligible		Visa #:			
Summany					Vaccine Supply:	PRIVATE		
Control Health Service	 Primary Addres 	SS						
	Address 1:		1 TOONTOW	N	Address 2:			
Exec. Dashboard	City:		ORLANDO		State:	FL		
▶ Lead	Zip Code:		32830					
Organization	Email							
∡ Facilities	Country:		United States		County/Parish:	ORANGE		
Search/Add	- Patient Phone Number(s)							
Search Results	Phone Number	Extensi	ion:	Phone Use Code	Equipment Type		Primary	
Detail	(304)123-4567			Primary residence number			Y	
Physicians &	+ Family & Contact							
Vaccinators	+ Alias	+ Alias						
► Lot Numbers	+ Secondary Pati	+ Secondary Patient Demographics						
	+ School	+ School						
Alorte	+ Primary Insurance							
Create/View Orders	+ Medical Home							
Search History	+ Birth & Death							
Cold Storage	+ Assessment							
Search/Add Demographics Remote Registry Manage Population Vaitlist Vaccinations View/Add Forecast Summary Oral Health Service Exec. Dashboard Lead Organization Facilities Search/Add Search Results Detail Physicians & Vaccinators Lot Numbers Alerts Create/View Orders Search History Cold Storage	Birth File #: Age: Reminder/Recall P Code Sex: Mother Maiden Nm VFC status: - Primary Addres Address 1: City: Zip Code: Email Country: - Patient Phone I Phone Number (304)123-4567 + Family & Conta + Alias + Secondary Pati + School + Primary Insura + Medical Home + Birth & Death + Assessment	ublicity n: ss Number(s) Extensi act ient Demo nce	93 yrs FEMALE Ineligible 1 TOONTOW ORLANDO 32830 United States) ion:	N Phone Use Code Primary residence number	Multi Birth Indicator: Birth Order: Military: Recall Attempts: Nationality: Passport #: Visa #: Vaccine Supply: Address 2: State: County/Parish: Equipment Type	N 0 PRIVATE FL ORANGE	Primary Y	

Helpful Tools (cont'd)



Edit the date and/or time of an order

			State: Zin:	WV 25202			
Monday: Wednesday: Friday:	09:00 09:00 09:00	17:00 ∨ 17:00 ∨ 17:00 ∨ 17:00 ∨	Zip. Tuesday: Thursday:	25502 □ 09:00 ∨ □ 09:00 ∨	17:00 ∨ 17:00 ∨		
PIN: 200023			Instructions: #	Instructions: ####M, T, W, TH, F; MTW			
Submitter: CAROL SMITH (PMCAROL1)							
Comments:							
Inventory Last Submitted: 09/05/2017 Last Order Submitted: 09/05/2017 08:58:04 AM							
Accountability: Inventory Submission Report (Reconciliation) Cold Storage Temperature Submission			Last Date Submitted:		Past Due? Yes Yes		
Order Frequency: Monthly Order Timing: Order Schedule:							

Valuable Websites



www.cdc.gov/vaccines



Valuable Websites (cont'd)



www.immunize.org

HOME FABOUT IAC FCONTACT FA-Z INDEX FDONATE formerly Immunization. Favorites Handouts & Staff Materials Clinic Tool	SHOP SUBSCRIBE For Healthcare Professionals Action Coalition (IAC) Sign up for email newsletter S Vaccine Information Statements Vacc	For the Public For Coalitions Search ines Talking about Vaccines
Welcome Welcome to Immunization IZ Express Ask the Experts Handouts Immunization News Shop IAC Velcome to Immunization	<section-header><section-header><section-header></section-header></section-header></section-header>	Order now! Laminated Immunization Schedules
IT CONTRACTOR OF	Ask the Experts! AC experts answer more than 1,000 questions from healthcare professionals about vaccines and their use.	Aduit Aduit Aduit Match Fight the flu and COVID-19 too: Influenza vaccination now and beyond and practical approaches to vaccine coadministration

Valuable Websites (cont'd)



oeps.wv.gov/immunizations

State Agency Directory Online Services					
Health, Mesources Resources Resources	Office of Epic & Pre	Search this site			
A to Z	Immunizations	How Do I?	About Us		
OEPS > Immunization IMMUNIZA QUICK LINK ABOUT CDC Childcare, Sch COVID-19 VAC Healthcare Pro Newsletters Preventable Di Provider Traini Sharps Dispos Vaccines For O Vaccine Inform West Virginia I Contact Us	ATIONS S ool & College Requirements CINE INFORMATION wider Area seases ing Materials al children "VFC" Program hation Statements mmunization Network "WIN"				
	Privacy	350 Capitol Street, Roo Contact , Security and Accessibility WV	m 125, Charleston, WV 25301 t Us Site Map .gov USA.gov © 2022 State o	of West Virginia	

Reminders



- All immunizations given to anyone 18 years of age and younger must be reported (<u>NOT</u> just VFC eligible patients)
- Adult immunization reporting is strongly encouraged
- VFC providers select lot number for all VFC vaccinations
- Medical Exemptions must now be entered in WVSIIS
- Remember to add the birth order on twins, triplets, etc. either in WVSIIS or in your electronic system
- When you cannot find a patient, type in the first and last name because the date of birth may be entered wrong
- If you know a patient is in the registry but, cannot find them, call us before entering the patient. It may be merged with a twin or the wrong date of birth

Reminders (cont'd)



- If you think a vaccine is entered incorrectly by another facility, please contact that provider
- If submitting electronically, please make sure there is someone responsible for checking the files sent over to the immunization registry
- When checking a file that is sent electronically, "E" means error, "W" means warning, and "I" means ignore
- If files have "E" they will not cross over to the immunization registry
- Please remember if you do not own a patient, mark them as "do not take ownership" when you are adding their vaccine to the immunization registry. If not, you will automatically take ownership of the patients' records

Reminders (cont'd)



- Notify WVSIIS trainers when a user needs to be inactivated
- Go to the document center under main tab and select document center to print off user guide, new user enrollment form and other helpful documents
- Make sure phone number is included on patients' record and on medical exemption record
- Make sure you use Google Chrome or Firefox to access the WVSIIS website
- Send temperature logs to Sandra Wright at <u>Sandra.Wright@wv.gov</u>

Contact Information



Carolyn Smith Information Quality Services Coordinator (304) 352-6262 Carolyn.J.Smith@wv.gov

Becky Pierson Information Quality Services Specialist / Trainer (304) 352-6261 Becky.L.Pierson@wv.gov

Kristen Thompson Information Quality Services Specialist / Trainer (304) 352-6219 Kristen.L.Thompson@wv.gov

Help Desk (304) 356-4047 wvsiisforms@wv.gov

WVSIIS Main Number (304) 558-2188 WVSIIS Fax Number (304) 558-1899 or Toll Free at (877) 408-8927

Immunization Registry Website: <u>www.wvimm.org/wvsiis</u>