MEMORANDUM

TO: Local Health Department Immunization Staff

FROM: Beth Rowe-West, R.N., B.S.N.
Immunization Branch Head

SUBJECT: The Annual Immunization Assessment Process
Using the North Carolina Immunization Registry (NCIR)

May 18, 2012

The purpose of this memo is to review main points about the 2012 annual immunization assessment process, and to provide information for tracking this year’s cohort. As in the past, the assessment will review NCIR records of children 24 through 35 months of age who are active in each Local Health Department (LHD), as well as those who reside in the corresponding county. The assessment will determine an “immunization compliance rate”, which is the percentage of children who have documentation of being up-to-date (UTD) by 24 months of age with the complete required 4:3:1:3:3:1 (4DTaP, 3IPV, 1MMR, 3Hib, 3HepB, and 1VAR) series of vaccinations.

The criteria for tracking this year’s annual assessment cohort are very similar to last year’s criteria. The birth date range of the clients to be assessed is from 10/02/2009 to 10/01/2010. The date that the data will be extracted from the NCIR will be Tuesday, October 2, 2012.

There is one major change for this year’s assessment. This year, the LHDs will have the ability to run their own reports using the NCIR Benchmark Report. This report may be generated at any time, but if generated on the day of the assessment (October 2, 2012), the results will reflect the final assessment rate conducted by the Immunization Branch. While you may continue to use the assessment reports from the NCIR or CoCASA, the NCIR Benchmark Report is much more user friendly. In addition the assessment will be conducted using this report. Accompanying this memo is instructional information about running the NCIR Benchmark Report.

As described in the annual LHD agreement addenda, an overall county compliance rate as well as an organization (LHD) compliance rate will be calculated and reported. Some children may be excluded (made “inactive”) from your LHD cohort in accordance with the categories defined in the “Exclusion Criteria For Making Clients Inactive From an Organization” document, which also accompanies this memo.

If you have any questions, please contact your Regional Immunization Consultant. As always, the Immunization Branch appreciates your commitment to assuring the health of North Carolina’s children.

Enclosures (2)

CC: Immunization Central Office Staff
    Regional Immunization Nurses (RINs)
    Regional Immunization Consultants (RICs)
    Danny Staley
    Joy Reed

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The NCIR Benchmark Report

The NCIR Benchmark Report provides a summary of the immunization status of a particular group of clients for a specific immunization benchmark or predefined series of benchmarks.

For detailed information on this report see section 10 of the NCIR user manual, within the NCIR, starting on page 10.24; http://ncir.dhhs.state.nc.us/docs/Reports_and_Forms.pdf

You can also view http://www.immunize.nc.gov/providers/stateconference.htm and choose the presentation named: “Benefits of NCIR Reports…” and review slides 58-82 for info regarding this new report.

To view your LHD's current number and percentage of clients who meet the benchmark criteria for this year’s annual assessment, and to obtain a list of clients who are NOT yet up-to-date for the required vaccinations; enter the following information in the appropriate fields;

Enter the birth date range 10-02-2009 to 10-01-2010.

Enter the Evaluation date as the current date, (either manually type in that date or select it from the pop up calendar),

Select the benchmark; at the Age @ 24 months, click the row to highlight.
The NCIR Benchmark Report (cont.)

Click “Generate”,

![Image](36x664 to 311x690)


![Image](36x553 to 532x617)

When the report link is ready, click the link to view the report results and to see a list of clients who did not meet the benchmarks and who are not yet up-to-date for the required vaccinations.

![Image](36x258 to 533x490)

To view the current number and percentage of clients within your county, simply change the client population as shown below, and use the same criteria (birth date range, evaluation date, and benchmark) as used for the LHD report.

![Image](36x108 to 532x182)

If you have questions about this report, please contact your Regional Immunization Consultant; see [www.immunize.nc.gov/contacts.htm](http://www.immunize.nc.gov/contacts.htm) for contact information.
Exclusion Criteria For Making Clients Inactive From an Organization

Guidance for Local Health Departments for the 2012 Annual Immunization Assessment

Every year the North Carolina Immunization Program (NCIP) conducts assessments of immunization compliance among two year olds in each Local Health Department (LHD) and each county. Assessments are conducted using data extracted from the North Carolina Immunization Registry (NCIR) to determine an “immunization compliance rate”, which is the percentage of children who have documentation of being up-to-date (UTD) by 24 months of age with the complete required 4:3:1:3:3:1 (4DTaP, 3IPV, 1MMR, 3Hib, 3HepB, and 1VAR) series of vaccinations.

In order for LHD assessments to provide an accurate portrayal of their own organization’s active clients' vaccination status, clients should be "excluded" from the active client list by having their client status set to ‘Inactive’ or ‘Permanently Inactive-Deceased’ when applicable.

Using the **Status** field on the “Client Information” tab within the NCIR screen as shown below:

![Client Information Screen](image)

Set the client's status to "Inactive" if he/she fits into one of the following categories:

- **Moved or Going Elsewhere (MOGE)**: (set NCIR status to “Inactive”) any client confirmed as receiving immunization services elsewhere. Document in the client’s permanent medical record. The documentation must include the estimated date of transfer of service and the new service provider (as specific as possible; e.g., Client transferred to C. Pediatrics in Nov 2011).

- **Unable to locate**: (set NCIR status to “Inactive”) the expectation is that LHDs will make reasonable efforts to locate a client who may be in need of immunizations. However, tracking resources should be allocated in an efficient manner. Therefore a LHD may identify a client as “unable to locate” if all three of the following conditions are met:

  1) The client has not received any service from the LHD in the last 12 months, AND
  2) Any telephone number(s) is no longer valid for the client (either the phone is disconnected, or the family no longer resides at that number), AND
  3) A postcard or letter has been returned and no other address is known; or a certified letter is returned; or there is no address entered for the client. **Note**: The client will remain in the county assessment and will be identified as unable to locate. Please do not change the client’s county of residence unless you know the correct county.

Any relevant information should be documented in the client’s medical record. The documentation must include:

- the date the phone number was verified as no longer valid, and
- the date the address was validated as being no longer valid (as specific as possible).
Exclusion Criteria For Making Clients Inactive From an Organization (cont.)

Guidance for Local Health Departments for the 2012 Annual Immunization Assessment

Within the NCIR, every client's County of residence and Responsible Person(s) address information should be verified at each encounter. If a client has moved out of state, you should change the county of residence to "Out of State", as shown below:

If you are uncertain of the NC County, please ask the client/responsible person. No client should ever have "Unknown" listed as their county of residence. All clients within a corresponding county of residence (regardless of their client status within any organization) will be included in calculating a county immunization compliance rate. Countywide compliance rates are used in determining the statewide rate.

If you only provide a client with a specific vaccination(s) such as a giving a flu shot, you are still responsible for assuring the client is age appropriately immunized with all vaccinations. You should always update a client's NCIR record with any historical immunization(s), as well as the immunization(s) administered during any visit, and then provide the client with a completed, current copy. If the client is receiving all immunizations elsewhere, you may set his/her status to 'inactive'. If the client is NOT age appropriately immunized, and does not have another immunization home, you should continue follow-up with the client until the client is age appropriately immunized, or until their status should be changed to ‘inactive” due to a valid reason.

A client/parent/guardian who delays or refuses to come to your facility for an immunization(s), even after repeated follow-up should not be made “inactive”.

- Document the dates of notification (phone calls or letters sent) in the client's permanent medical record according to your agency's protocol.
- You may set the NCIR Responsible person(s) notices to “no” if you do not want to continue to try to contact the client via that method, but the client should remain active in your organization, as further follow-up will be necessary until they are appropriately vaccinated.

If a client/parent/guardian refuses an immunization(s), or for some other reason is unable to receive an immunization(s) at a routine office encounter, you should:

- Document that information appropriately in the NCIR Client Comment(s),
- Document in the medical record according to your agency protocol. The client should remain active with your organization, as further follow-up will be necessary.

Determining who is unvaccinated is an important public health function for disease prevention, especially when disease outbreaks occur. Having an accurate assessment of immunization compliance within your facility, as well as within the county is critical for this purpose.

If you have questions about which status to assign to a specific client, contact your Regional Immunization Consultant; see [www.immunize.nc.gov/contact.htm](http://www.immunize.nc.gov/contact.htm) for contact info.