## Minnesota Immunization Information Connection (MIIC) Strategic Plan: 2013-2017

### Goals
- All immunization providers utilize MIIC.
- MIIC recognized as the best, most complete immunization data resource for Minnesota.
- MIIC is the most reliable tool for capturing immunization data and improving immunization rates.

### Vision
Our vision is to provide an effective, comprehensive and sustainable immunization information system in Minnesota.

### Values
MIIC staff and partners are:
- Dedicated to improving immunization rates.
- Committed to coordinating efforts and adapting to changing needs.
- Advocates for each other’s unique perspectives.

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Enhance Functional Capacity</th>
<th>Improve Data Quality</th>
<th>Build Awareness &amp; Deepen Understanding</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Actions</strong></td>
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<tr>
<td>1.1</td>
<td>1.1 Continue development of vaccine forecaster ensuring it reflects current ACIP recommendations.</td>
<td>2.1 Establish clear roles that improve communication and coordination with provider offices on data quality.</td>
<td>3.1 Continue to develop user-friendly communication materials and update and improve the promotion of user guidance.</td>
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<td>1.2</td>
<td>1.2 Ensure cutting edge interoperability with EHR’s, including support for Meaningful Use, alternate access, and increased standards-based exchange and submissions, etc.</td>
<td>2.2 Build functionality that flags data quality issues and pushes data out to providers to make corrections.</td>
<td>3.2 Continue to promote historical data entry of paper records to providers.</td>
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<td>1.3</td>
<td>1.3 Continue to develop reports that users need such as assessment reports and client follow-up reports.</td>
<td>2.3 Address major data quality issues such as MOGE and duplicate records.</td>
<td>3.3 Build MIIC champion program to celebrate best practices by providers.</td>
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<td>1.4</td>
<td>1.4 Build internal capacity to do coding changes.</td>
<td>2.4 Assess and enhance the QA process for new and ongoing data submissions.</td>
<td>3.4 Connect at conferences and partner with professional organizations to further MIIC education.</td>
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<td>1.5</td>
<td>1.5 Develop data tools that aid in outbreak response at the community level.</td>
<td>2.5 Ensure that MIIC is utilized for and supports provider-based efforts to improve immunization rates such as reviewing assessment data and conducting reminder-recall.</td>
<td>3.5 Promote and support vaccine ordering, reporting of dose-level eligibility, and use of MIIC inventory management among MnVFC providers.*</td>
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<td>1.6</td>
<td>1.6 Enhance functionality in MIIC for MnVFC vaccine ordering to allow providers to send and/or modify dose-level client eligibility through data exchange and the user interface; and enhance inventory management in MIIC, including decrementing based on reported doses administered, expanded/new inventory management tools and reports.*</td>
<td>2.6 Continue to work with partners (MN Community Measurement, the Board of Pharmacy, e.g.) on promoting MIIC as being the immunization resource.</td>
<td>3.6 Promote how patients can have long-term access to their own immunization record.</td>
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<td>2.7 Ensure that MIIC is utilized for and supports population-based efforts to improve immunization rates, including programs such as FluSafe and the High Risk Zip Code Project, as well as updating the Minnesota Public Health Data portal and assisting with general reminder-recall.</td>
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<td>2.8 Ensure that MIIC functionality is utilized for and supports AFIX program requirements for assessments.*</td>
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</table>

### Outcomes
- MIIC utilization increases.
- Vaccine forecaster is up to date.
- Partners and providers garner greater utility from reporting.
- MIIC supports CDC grant-driven functionality to run the MnVFC program.*
- Viewed by providers and partners as reliable.
- MIIC rates are comparable to NIS rates.
- More providers actively participating in data quality efforts.
- An increase in active clinic administrators.
- Increased users including those not traditionally targeted.
- More providers sending historical records.
- Number of active users within a clinic.
- Number of MIIC champions recognized.

### Indicators
- Number of reports run
- Percent of providers participating
- ACIP change implementation timeframe
- Comparability to NIS rates.
- Number of providers involved in data quality efforts.