

Countermeasure and Response Administration



Pandemic Influenza Doses Administered Pilot Reporting Event (PIDAPRE)

Background: In the event of an influenza pandemic, timely and complete reporting of Pandemic Influenza vaccine doses administered will allow the federal government and Project Areas to closely monitor the use of the vaccine while it is in scarce supply. CDC and the Project Areas are planning to use a small number of seasonal influenza clinics as proxies for pandemic influenza vaccine administration sites to evaluate technical systems for monitoring pandemic influenza vaccine doses administered. Project Areas will be assessed on their ability to collect and report to CDC on vaccine doses administered and CDC will assess the technical capability of the CRA to transmit and aggregate Project Area data. The goal is to conduct this exercise with minimally invasive impact to normal operations. This pilot will involve submission of a minimal number of data elements to CDC.

Why is the pilot project needed?

- To assess ability to collect and report vaccine doses administered data
- To assess the technical ability of CDC's CRA to transmit and aggregate Project Area data
- To provide perspective on federal, Project Area and clinic needs in order to scale-up for a pandemic situation
- To identify and address system gaps
- Testing tooling options and security aspects for federal and state partners
- Accomplish timely data exchange between key parties
- Initial attempt to exercise vaccine tracking plans

Collaborators:

- CDC – NCPHI, NCIRD, COTPER
- Project Areas: Public Health Emergency Preparedness (PHEP) and Immunization programs' staff
- Selected large, public sector, seasonal influenza clinic site(s)

Project Area Commitments: Data Expected and Frequency:

- Number of Clinics and Frequency: We are interested in getting at least two distinct transmissions of data.
 - If only one clinic site is being used, data from at least two clinic sessions should be reported using two distinct transmissions.
 - If more than one clinic site is being used, data from at least one session for each site should be reported using a distinct transmission for each site.
- Time Frame: Clinic sessions should occur between November 1 and December 31, 2007; data from each clinic should be compiled and transmitted within 48 hours of the clinic session.
- Data: (Variables represent a subset of the data needed for pandemic influenza vaccine doses monitoring and are selected as they are likely to be collected by seasonal influenza clinics as part of routine practice.)
 - a. Will NOT include: priority group, dose number
 - b. Will include: age (analytically relevant to pan flu and seasonal flu data collection), project area id, date of clinic

Expected Benefits or lessons learned:

- Illustrate technical gaps and needs
- Identify operational barriers
- Understand training needs of staff
- Identify equipment needs and capabilities
- Gain a preliminary understanding of cost and other impact implications to clinical operations
- Provide a framework for developing future pan flu reporting plans

Expected Challenges:

- Communication and support challenges among all parties
- Availability/distribution of seasonal vaccine
- Technical glitches and training and equipment needs
- Clinic scheduling
- Timeliness and completeness of reporting



SAFER • HEALTHIER • PEOPLE™

