

School and Child Care Immunization Requirements

Arizona Immunization Handbook

For Schools, Child Care, and Preschool Programs

Updated July 2022

Introduction

The <u>Arizona Department of Health Services (ADHS)</u> and the <u>Arizona Immunization Program Office (AIPO)</u> appreciate the time and effort the staff of schools and child care centers invest in verifying that all enrolled children are appropriately immunized and for submitting the annual <u>Immunization Data Report (IDR)</u> to ADHS/AIPO.

The Arizona Immunization Handbook for School and Child Care Programs (Handbook) is a reference guide for school and child care staff who review and document student immunization records, complete the IDR, and answer questions from parents and guardians about school immunization requirements for children. School, preschool and child care staff deal with immunizations every day and are expected to know a lot about them. This Handbook will help you.

The Handbook reviews school immunization requirements, staff responsibilities, procedures for evaluating immunization requirements, and reporting obligations. The Handbook can be found on the AIPO Child Care, School & College webpage and is supplemented by the Guides for Immunization Requirements (Child Care & K-12) and our new Vaccine Catch-up Flowcharts & FAQs resource. Additional job aids and various forms needed to complete immunization activities in the health office can also be found on the website.

Updates to immunization requirements and forms are posted on the AIPO website prior to the start of each school year, or with any significant changes. Please check the website for updated materials. While you may want to print the manual and place it in a three-ring binder, we suggest you access it electronically so that you get the latest versions of the information, forms, and job aids.

For any questions or comments, please call or contact:

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Responsibilities

To protect all children against serious vaccine preventable diseases, Arizona school immunization laws require students to receive immunizations before entry to child care and school. The laws and rules governing school immunization requirements are <u>Arizona Revised Statutes §15-871-874</u>; and <u>Arizona Administrative Code, R9-6-701-708</u>. Many organizations and individuals have responsibilities for assuring children and students in Arizona are immunized. See below for specific responsibilities.

Parents/Guardians:

The definition of a "parent" is "the natural or adoptive mother or father, a legal guardian appointed by a court, or a "custodian" as defined in A.R.S. 8-201. A parent is a person generally recognized as having care and decision-making responsibility for the child. Parents, including foster parents, have the responsibility to ensure their child is meeting Arizona school immunization requirements. Parents should keep accurate and up-to-date immunization records for their children. Parents are to submit an up-to-date immunization record or a valid ADHS exemption form to their child's school, preschool, or child care before the child can attend.

Healthcare Providers:

A physician is defined as a person licensed under <u>A.R.S. 32</u>, Chapter 13 or, Chapter 17, or Chapter 29. This definition also applies to persons licensed to practice allopathic (MD) or osteopathic (DO) medicine under the laws of another state or country. Per <u>A.R.S. 15-871</u>, the following licensed healthcare providers can administer vaccines in Arizona:

- Medical Doctors (MD) Chapter 13
- Doctors of Osteopathy (DO) Chapter 17
- Homeopathic Physicians (MD, DO, or MD(H)) Chapter 29
- Nurse Practitioners (ARNP) with prescriptive authority, Chapter 15
- Pharmacists, Chapter 18

Healthcare providers are encouraged to immunize patients according to the most current Centers for Disease Control (CDC) Advisory Committee on Immunization Practices (ACIP) recommended immunization schedules. Healthcare providers are to follow education and documentation requirements as stated in A.A.C. R9-6-703.

The HIPAA Privacy Rule permits providers to disclose proof of required immunizations to a school with agreement of the parent or guardian. The agreement may be obtained orally or in writing, and need not be signed or contain the other elements required in a formal, written HIPAA authorization. More information about the HIPAA Privacy rule as it relates to student immunizations can be found at: https://www.hhs.gov/hipaa/for-professionals/faq/student-immunizations/index.html

School, Preschool, and Child Care Staff:

A school is defined as a public, private, charter, or parochial school that offers instruction at any grade or level through grade 12, or any part thereof. The term school does not apply to day care/child care facilities regulated pursuant to Chapter 7.1.

A Child Care Facility is defined as a licensed child care center, certified child care group home, Head Start or preschool; a program caring for children that is licensed or certified by the <u>ADHS</u> <u>Child Care Facilities Licensing Division</u>.

An administrator is defined as the individual or the individual's designee having daily control and supervision of a school or child care facility. This is the person responsible for general enforcement of the law and rules, including exclusions, and submission of the annual Immunization Data Report for the required grades.

Administrators in these facilities have final responsibility when it comes to immunization compliance. It is the responsibility of the school administrator or child care administrator (or their designee) to ensure that an immunization record- or a valid ADHS exemption form- is maintained for each child enrolled at the school or child care center. The law requires child care facilities and schools to enforce immunization requirements, maintain immunization records of all children enrolled, and submit reports to public health agencies.

It is the duty of the administrator, by law, <u>A.A.C. R9-6-705</u>, to exclude children from school, preschool, or child care if they do not meet immunization requirements. Exclude or exclusion means not allowing a student to attend a school or child care facility based on lack of receipt of an up-to-date immunization record or valid ADHS exemption form.

Administrators may designate other staff to do immunization compliance tasks, such as nurses, health assistants, administrative personnel, or other school staff. Schools, preschools and child cares should have and follow policies to protect confidential information such as immunization records.

The first key to success is being very clear with parents or guardians that you must enforce the Arizona law and the basic rule of, "**No shots? No school!**". The ADHS "It's The Law" poster is dual-sided in English and Spanish and can be <u>ordered</u> through the AIPO website.



The following immunization compliance tasks are the responsibility of schools, preschools, and child cares:

- Ensure documentary proof of immunization as specified in R9-6-704 (A), Table 7.1 and Table 7.2
- Ensure documentary proof of immunity as specified in <u>R9-6-706</u> (D)
- Develop a manual tracking system or use a software system to collect student immunization information
- Identify students who are missing required immunizations and contact parents for referral and follow-up

- Exclude children who do not meet the immunization requirements
- Identify and keep a list of susceptible students (students with an exemption or missing doses) to use in the event of a disease outbreak
- Teach staff and parents about the importance of immunizations, in accordance with scope of practice, and
- Follow state immunization laws and school requirements.

County/Local Health Departments:

County health departments (aka local health departments) administer immunizations as well as provide materials about communicable disease and immunization rules. Public health officials have the responsibility to work with schools, preschools, and child cares to prevent and control outbreaks of diseases that vaccines can prevent. They also work with local healthcare providers to improve immunization levels in their communities. In the event of a disease outbreak, the County Health Department Health Officer or Medical Director or state health department personnel have the authority to exclude children from school, preschool or child care.

Arizona Department of Health Services:

The Immunization Program Office (AIPO) at the Arizona Department of Health Services (ADHS) tracks immunization levels in the state as part of a federal requirement. Clinical staff are available to answer questions about the immunization requirements, and are a resource about vaccines and vaccine-preventable diseases. The office has the responsibility to develop the guidance and forms for use at schools, preschool and child care facilities, which can be found on the <u>program website</u>. Public health staff may review school, preschool, and child care facility immunization records to ensure they comply with state regulations. The Immunization Program Office works with state, county and local agencies including:

- Arizona Department of Education (ADE)
- Arizona Department of Child Safety (DCS)
- County Health Departments
- ADHS Child Care Facilities Licensing Division
- Healthcare providers
- Health office staff for schools, preschools and child care centers

Vaccine Requirements

School, preschool, and child care staff can help protect children against serious diseases by encouraging full and timely immunization. Help parents understand that:

- Each child must have documentary proof of immunization or immunity for the required vaccines.
- Immunizing on time gives children the best protection.
- Immunization requirements in schools, preschools and child cares have been shown to increase immunization coverage levels.
- Communicable diseases still exist and international travel can bring diseases common in other part of the world to our communities.
- Keeping up-to-date records at home and school/preschool/child care is important
- Eligible children can get immunizations at no cost through the Vaccines for Children (VFC) program in Arizona. Providers may charge an administration fee, but they must waive the fee if the parent is unable to pay.

State Required Versus ACIP Recommended Immunizations:

The difference between state immunization requirements and national recommendations can get confusing. Staff should understand the difference so parents and guardians get the necessary information to their child's school, preschool, or child care. These definitions can help:

- **Recommendations**: The <u>Advisory Committee on Immunization Practices (ACIP)</u> makes national <u>vaccine recommendations</u> that healthcare providers follow as the "best practice" to get the best protection from diseases that vaccines prevent. Not all of the vaccines recommended by the <u>ACIP Immunization Schedule</u> are required for school or child care attendance in Arizona.
- **Requirements**: Children are required by Arizona statute <u>A.R.S. 15-872</u> to submit documentary proof of immunization to enter school, preschool, and child care, unless exempted according to section <u>15-873</u>.
 - The Arizona Administrative Code (A.A.C.) or rule <u>R9-6-702</u> further explains the law by determining immunization requirements using the ACIP Recommended Immunization Schedule along with Arizona-specific vaccine decisions.

Schools, preschools, and child care facilities must, at a minimum, obtain documentation of the state school required vaccines; however, this does not preclude schools from recommending or documenting additional vaccines that meet the ACIP recommended vaccination schedule. Each state sets its own requirements for school and child care attendance which may differ from what is required in Arizona. When a student, whether from another state or another country, enrolls in an Arizona school or child care they must adhere to the Arizona state requirements for attendance.

Arizona Required Immunizations:

According to the Arizona Administrative Code R9-6-702 any child attending school, preschool, or child care in Arizona is required by law to be fully immunized at the ages and intervals consistent with the rules for their age (preschool/child care), or grade (K-12th grades) or have proof of immunity against the following diseases:

Diphtheria	Measles (rubeola)
Tetanus	Mumps
Pertussis	Rubella (German measles)
Hepatitis A (for child 1-5 years of age in	Haemophilus influenza type b, for a child two
childcare, required for Maricopa County)	months through 59 months of age
Hepatitis B	Varicella (chickenpox)
Poliomyelitis (Polio)	Meningococcal disease

Tuberculosis (TB) screening for students is not part of the Arizona school immunization law. If you have questions regarding TB disease or TB screening requirements, please contact your local health department's TB control program. At ADHS, the Office of Disease Integration and Services houses the Tuberculosis Control Program.

Vaccine Requirement Guides and Resources:

Arizona vaccine requirements guides and resources are updated for each school year and can be found on the <u>Arizona Immunization Program's Child Care, School & College webpage</u>.

Immunization Requirements for Grades K-12

School requirements are listed on the <u>Arizona Guide to Immunizations Required for School Entry:</u> Grades K-12.

- ✓ Authorized school personnel must review each child's immunization record(s) at the time of enrollment and/or prior to school attendance.
- ✓ Students attending school must get the required doses listed in the guide to be compliant with immunization requirements.
- ✓ The guide is meant to review the vaccines required at the age when the child is enrolled at a particular school. To find the doses required, look at the column that include the student's current age, and then the row for the required vaccine.
- Compare the child's number of vaccine doses to the requirements, by age, and determine if all requirements are met. Check the timing and minimal intervals of doses specified. The requirements and rules vary depending on the student's age and grade.
- ✓ Complete the <u>Arizona School Immunization Record</u> (ASIR109R) or enter the data into your school-based vaccination information system.

If requirements are not met and the child lacks any required immunization doses, schools are to give the parent/guardian the <u>Immunization Screening and Referral Form for School K-12th Grade</u>. If a review of the student records does not happen until the child is already attending school, then the parent/guardian is to be notified using the referral form and indicate a "due by" date on the referral form. The Department asks schools to review immunizations at enrollment and up until the time your facility opens for school and refer those students who still lack the required immunizations, using the Immunization Screening and Referral Forms (for <u>K-12</u> and <u>Child Care</u>), and providing them with a "due by" date when the vaccines will be needed. A reasonable time frame is recommended to allow parents to make appointments.

Because up-to-date vaccination is critical to preventing disease in our communities the Department suggests you work with your school or district officials and/or your legal counsel to determine if or how long a vaccination extension would be allowed in your district based on current law.

• Immunization Requirements for Child Care, Preschool, and Head Start

Child care, preschool and Head Start requirements are shown on the <u>Arizona Guide to</u> Immunizations Required for Entry: Child Care or Preschool.

- ✓ Authorized child care personnel must review each child's immunization record(s) at the time of enrollment and/or prior to child care attendance.
- ✓ Students attending child care or preschool must get the required doses listed in the guide to be compliant with immunization requirements.
- ✓ The guide is meant to review the vaccines required at the age when the child is
 enrolled at a particular child care or preschool. To find the doses required, look at
 the column that include the child's current age, and then the row for the required
 vaccine.
- ✓ Compare the child's number of vaccine doses to the requirements, by age, and determine if all requirements are met. Check the timing of doses to make sure minimum intervals have been met. The requirements and rules vary depending on the student's age and grade.
- ✓ Complete the <u>Emergency Immunization and Information Record Card</u> (EIIRC 201). Preschools and child care facilities may also document on the <u>Arizona School Immunization Record</u> (ASIR 109) or a facility-based vaccination information system.

If the child lacks immunizations required for child care attendance, child care centers are to give the parent/guardian the <u>Immunization Screening and Referral Form for Child Care and Preschool</u>. Per child care rules, the child's parent/guardian has **15 calendar days** after child care entry to provide the child care center with proof of all required immunizations. The child shall be excluded from the center if the parent/guardian of the child fails to provide adequate documentation.

4-Day Grace Period for Administered Vaccine Doses

The Advisory Committee on Immunization Practices (ACIP) allows for most vaccine doses administered within 4 days of the recommended minimum age or interval to be counted as valid. This is now considered standard practice according to ACIP recommendations as of July 2014. However, the <u>4-day grace period</u> does not apply in all situations. It does not allow a 4-day grace period between doses of varicella, MMR vaccines, or nasal influenza vaccine doses, as these are all live vaccines. Live vaccine doses must be given on the same day or at least 28 days apart.

The Arizona Immunization Program Office (AIPO) accepts vaccine doses given within the ACIP-approved grace period as valid for child care and school entry. The 4-day grace period includes the first MMR, varicella, or hepatitis A dose, which may be counted if it was administered no sooner than 4 days before the child's first birthday.

School/Child Care Staff Immunization Requirements:

K-12 Schools

Arizona immunization statutes and rules to not address adult immunization requirements or requirements for K-12 school staff; however, knowing staff immunization status can prepare schools in advance of a disease outbreak. Decisions for staff vaccine requirements are made by the school or the school district and should involve the Human Resources departments. You may wish to reference the ACIP Recommended Adult Immunization Schedule or the Recommended

<u>Vaccines for Healthcare Workers</u> if you choose to make vaccine recommendations or requirements for your staff.

During an outbreak susceptible staff not completely immunized or able to prove immunity may be excluded from school at the direction of the local Health Officer. Staff should refer to their school or district policies whether staff can take sick leave when excluded.

Child Care/Preschool/Head Start

Statutes. Rule R9-5-301, General Licensee Responsibilities, Section F: A licensee shall ensure that a staff member submits, on or before the starting date of employment or volunteer services, one of the following as evidence of freedom from infectious active tuberculosis: 1. Documentation of a negative Mantoux skin test or other tuberculosis screening test recommended by the U.S. Centers for Disease Control and Prevention, administered within 12 months before the starting date of employment or volunteer service, that includes the date and the type of tuberculosis screening test; or 2. If the staff member has had a positive Mantoux skin test or other tuberculosis screening test, a written statement that the staff member is free from infectious active tuberculosis that is signed and dated by a health care provider within six months before the starting date of employment or volunteer service.'

R9-5-301 Section K states: A licensee shall not allow a staff member who lacks proof of immunity against a disease listed in R9-6-702(A) to be present in the facility between the start and end of an outbreak of the disease at the facility.

R9-5-402, Staff Records and Reports Section A: A licensee shall maintain a file for each staff member containing: (5) The staff member's written statement attesting to current immunity against measles, rubella, diphtheria, mumps, and pertussis.

Please contact the <u>Child Care Facilities Licensing Division</u> if you have any questions as to staff vaccination requirements.

College/University Immunization Requirements:

Arizona state law does not address or mandate immunization requirements for colleges and universities. These decisions are made by the individual schools and requirements vary. On the AIPO <u>College Information</u> page, you can find links to the health office websites for several Arizona universities as well as general <u>recommended immunizations</u> for college students. Students getting ready for college should contact their school to confirm which immunizations might be required for attendance.

Requirements for Special Student Categories

Additional special school populations for which there are responsibilities regarding immunizations are outlined below:

Alternative or Online School Programs:

There are a variety of online education opportunities for children in Arizona. We encourage online schools to obtain immunization records for all of the students registered in their programs. Students enrolled in online programs who physically attend an Arizona school or facility for the purpose of attending an online class, are in a room with other online students for classes, or are participating in classes or activities such as band or physical education, are required to have immunization records on file with the program and/or the physical school. These students should then be included in the school's annual Immunization Data Report to the state health department, if in an applicable grade. Programs unable to distinguish between students that are online only and those students that participate in campus program activities with other students must have immunization records for all of the students.

Some online or virtual schools have a testing period where students are all together in a room or facility. If this is a process for your school, then collection of immunization records for all students is encouraged.

Arizona rules do not address the exclusion of online students who are noncompliant with immunizations. Online school administrators will need to develop policy as to exclusion, particularly if your online school elects to collect immunization records on all students, regardless if they are strictly online or physically attend a facility for the online classes.

Foster Care Students:

The <u>Every Student Succeeds Act</u> (ESSA) states that students in foster care should remain in their <u>school of origin</u>. When it is not in the best interest of the student in foster care to remain in their school of origin, then that student would need to be immediately enrolled into the new school, even without the ability to produce records normally required for enrollment (i.e. proof of immunization, birth certificate, transcripts, etc.). The enrolling school shall immediately contact the school last attended to obtain relevant academic and other records.

School staff may also contact their district or charter liaison for students in foster care for assistance in obtaining needed records (a <u>list of foster care liaisons</u> by district/charter can be found on ADE's Foster Care page). <u>ARS 15-872</u> states that while the school is still required to obtain the student's immunization record and ensure that the student has met all immunization requirements, that requirement should not delay the enrollment or attendance of a student in foster care.

The <u>Arizona Department of Education</u> (ADE) has interpreted ESSA to supersede regulations established by individual states. Because the ADE is the primary state agency that regulates schools and they have a great deal of knowledge and expertise in matters concerning federal

legislation pertaining to students in foster care, ADHS defers to them concerning the continued attendance of students in foster care.

When ESSA passed in 2015, it <u>amended the definition of homeless</u> in <u>McKinney-Vento</u>. The part of the homeless definition that says 'awaiting foster care placement' has been REMOVED from McKinney Vento. Therefore, children in foster care are NO LONGER identified as 'homeless'. Children in foster care are their own subgroup within the school system.

The <u>Arizona Department of Child Safety</u> (DCS) policy is that foster children must be fully immunized unless there is a medical contraindication, which would then require an ADHS Medical Exemption to be completed. If the child is missing immunizations the foster parent must take the child to a health care provider as soon as medically possible for immunizations according to the ACIP catch-up schedule. DCS further states that licensed foster parents cannot impose their vaccine hesitancy beliefs on foster children and are not authorized to request a school or child care vaccine exemption for a foster child. See also section on Exemption Forms, Foster Child Guidance.

Contact information for the State Foster Care Education Coordinator is listed below.

Joey L. Taylor

Foster Care Education Coordinator

Phone: 602-542-3569 Email: joey.taylor@azed.gov www.azed.gov/fostercare/

Homeless Students:

Homeless students are protected by the federal McKinney-Vento Homeless Assistance Act. Families and homeless students are often not able to get and keep copies of immunization records. According to the McKinney-Vento Act, schools must allow homeless students to enroll, attend classes, and participate fully in school activities, even if their immunization and other school records are missing or unavailable at the time of enrollment. Once a homeless student is enrolled, school staff should work with the student's former school to obtain the student's immunization records quickly.

ARS 15-872 states that while the school is still required to obtain a student's immunization record and ensure that the student has met all immunization requirements, it also says that students in a homeless situation are not required to provide documentary proof of immunization until the fifth calendar day after enrollment in school. The Arizona Department of Education (ADE) has interpreted the McKinney Vento Act to supersede regulations established by individual states. Because the ADE is the primary state agency that regulates schools and they have a great deal of knowledge and expertise in matters concerning McKinney-Vento, ADHS defers to them concerning the continued attendance of homeless students without proof of immunizations. Further information can be found in the ADE Guidance for Immunizations for Homeless Students.

If a child or youth experiencing homelessness needs to obtain immunization or other required health records, the enrolling school will immediately refer the parent, guardian or unaccompanied youth to the <u>local liaison</u>, who will assist in obtaining necessary immunizations or screenings, or immunization or other required health records [42 U.S.C. § 11432(g)(3)(C)(iii)]. Homeless

students should not be excluded from school for being out of compliance with school immunization requirements. Please refer to ADE <u>Office of Homeless Education</u> for additional information.

Contact information for the State Homeless Coordinator is listed below.

Silvia Chavez, BA

State Coordinator Homeless Education Program

Phone: 602-542-4963

Email: silvia.chavez@azed.gov www.azed.gov/homeless

Homeschooled and Homebound Students:

Arizona Revised Statute 15-802.01 allows homeschooled students to participate in public school interscholastic activities (such as sports, band, music) "in the same manner" as pupils who are enrolled in the public schools. Enrollment, policies, and requirements for homeschooled students are to be consistent with those policies established for students enrolled at that public school. Homeschooled children physically attending a public school for specific classes are required to present an up-to-date immunization record, or valid ADHS exemption form, to be compliant with Arizona school immunization requirements.

The rules do not specifically address homebound students, which are students receiving (limited) educational services at home as they are not medically or otherwise able to physically attend school; however, homebound pupils would fall under the definition of "pupil" which is any person who is eligible to receive instruction at a school and would then need to meet the immunization requirements like any general student who is enrolled to attend school.

International Transfer and Student Exchange Programs:

International transfer and exchange program students must follow the same rules as all other Arizona students and provide an up-to-date immunization record prior to attending school. This includes short-term visitors.

For children who arrive with their family from a non-U.S. country (non-exchange program) and are entering school, obtain immunization records from the parents. Some may have immigration forms or translated forms, while others will bring original documents from their origin country.

For student exchange programs, the program agency is responsible for making sure students obtain needed vaccines prior to arrival. According to the <u>Bureau of Education and Cultural Affairs</u> - <u>Exchange Programs</u> the exchange program takes legal responsibility during the course of the program and the exchange student's natural parents remain legal guardians. Each exchange student's Certificate of Health contains a medical release form so that host parents may secure medical treatment in the case of an emergency and the student is provided with health insurance should they need to visit a physician. In Arizona the host parent cannot take a student to get immunized or sign an exemption form unless they have notarized permission from the student's parents to do so. It is strongly recommended that immunization records be received as part of pre-registration for all international students, whether by the individual schools or the sponsoring

agency. Schools should contact the sponsoring agency if there are questions regarding immunization status of an exchange student.

Translation Services: The Arizona Immunization Program Office does not have translation services available to interpret immunization records from other countries. You can refer families without personal records or with foreign records that you cannot understand to their physician or county/local health department for translation assistance. Resources to assist in translation are listed below:

Google translate at https://translate.google.com/ may help with simpler translation questions.

Foreign Language Terms: Aids to translating foreign immunization records https://www.cdc.gov/vaccines/pubs/pinkbook/downloads/appendices/B/foreign-products-tables.pdf

Vaccine Terms in Multiple Languages https://www.immunize.org/catg.d/p5122.pdf

Special Education/Non-registered "special course" students:

Students in special education programs should follow requirements for whichever grade they are in. If these students are not associated with a specific grade, they should follow the requirements for students who are about the same age. Children in preschool or child care who attend a public school for any type of class, such as speech, are required to present an up-to-date (for age) immunization record to the school to be compliant with Arizona school immunization requirements.

Transfer Students (In-State/Out-of-State):

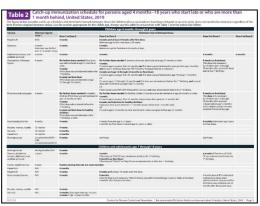
For children transferring from another school, either in-state or from out-of-state, the new school must review the student's immunization records to make sure all immunization requirements have been met. Arizona Revised Statute 15-828 (G) requires that the enrolling school request cumulative records (including immunization records) from the former school within five (5) school days of enrollment. Any school requested to forward a copy of the transferring pupil's record to the new school should comply and forward the record within ten (10) school days after receipt of the request.

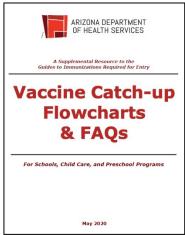
When a child transfers from another school, schools are encouraged to ask parents to bring their child's personal immunization record from the healthcare provider or clinic to registration rather than waiting for the cumulative folder to arrive from the former school. Parents may also ask the former school for a (signed) copy of the current school immunization record as this can also be accepted for immunization documentation. Students whose parents cannot present an adequate record at the time of entry will not be allowed to enter/attend school until the cumulative folder with immunization record arrives and demonstrates that the student is up-to-date with Arizona requirements.

Immunization Status

Complete: Students have an immunization status of complete if they have been fully immunized against each of the vaccine-preventable diseases (VPD) required for their age as listed in R9-6-702 and have submitted such documentation to the school or child care facility or have provided proof of immunity for a specific VPD. (See Exemption section)

Conditional: This is a temporary enrollment status for students who have not completed the series of one or more of the required immunizations and **are in the minimal interval period before additional doses can be administered.** This status allows them to attend child care or school if they make satisfactory progress towards full immunization. Satisfactory progress means the child must start, or continue, getting the missing immunizations as they become due in the future. For those students in the process of completing the series, specific minimum time intervals between doses are to be followed per R9-6-702, Table 7.2, which is closely aligned with the ACIP catch-up schedule. The minimum intervals can be also be found on the Guides for Immunization Requirements for grades K-12 and Child Care or Preschool, as well as on the CDC's Catch-up immunization schedule. Also review the Vaccine Catch-up Flowcharts & FAQs resource for additional guidance.





If a child has not received all immunization doses which are currently due, the child is to receive the next dose due at the minimal interval period in order to attend school until all doses are received and documentation is provided. If a child has not received ANY dose of a required vaccine, a first dose MUST be received prior to entry/attendance at school.

The school or child care facility must follow up by notifying parents, sending an Immunization Screening and Referral form with a stated "due by" date, checking documentation that the needed immunizations were received, and adding the new dates to the ASIR and/or school-based vaccination information system. After a child has caught up on all missing required immunizations, their "conditional" status changes to "complete." If a child does not get the required missing immunization by the indicated "due by" date, then the "conditional" status changes to "out of compliance".

Out of Compliance: Children have an immunization status of "out of compliance" if they:

- Are not fully immunized for their age against each of the vaccine–preventable diseases listed in A.A.C. <u>R9-6-702</u>, and
- Are not in a temporary conditional status for the missing required immunization, and
- Do not have a valid ADHS exemption for the missing required immunization on file.

According to A.A.C. <u>R9-6-705</u>, any child with "out of compliance" status is to be excluded from attending school, preschool, or child care until they meet the legal requirements of the law.

Exempt: Arizona school and child care immunization laws allow a student to be exempted from immunization for medical, personal or religious reasons. The Arizona Immunization Program Office promotes immunization education for parents so that parents may make informed decisions regarding immunizations for their children. Exemptions provide an option for the parents of children who have a medical condition that contraindicates immunization, or a personal or religious belief that opposes immunization. Exemptions should not be used for the purpose of convenience.

**Some Arizona schools may be participating in the ADHS online Immunization Education Course (IEC) pilot program. Information on the IEC and the pilot program can be found here.

Participating schools are to follow the exemption process guidelines as set out in the IEC Handbook and webpage.

Exemption Forms

The <u>Medical Exemption Form</u>, the SCHOOL <u>Personal Beliefs Exemption Form</u> (for students in K-12 grades) and the CHILD CARE <u>Religious Beliefs Exemption Form</u> (for students in preschool, child care and Head Start programs) are posted at http://azdhs.gov/shots4schoolaz.

Please note that the ADHS forms are the only valid and acceptable forms of exemption. The ADHS form should not be altered. Child care facilities and schools should not accept any exemption form that is not the ADHS format or that appears to be altered.

Medical Exemptions:

- Permanent If the child has a permanent medical condition that contraindicates administration of one or more immunizations, the child can be exempted from the immunization(s). The ADHS Medical Exemption Form must be completed and signed by the child's physician (MD or DO) or nurse practitioner (NP) and parent/guardian and submitted before the child enters school or within 15 days of child care entry. The physician or nurse practitioner must indicate in writing on the ADHS Medical Exemption Form which immunization(s) are contraindicated against and the specific nature of the medical condition that precludes immunization. There is no expiration date or resubmission required for a permanent medical exemption.
- **Temporary** A child whose physician (MD or DO) or nurse practitioner (NP) decides to postpone one or more immunizations because of a valid medical condition may attend school "on condition" that the needed dose(s) are obtained when the exemption expires. The physician or nurse practitioner must indicate in writing on the ADHS Medical Exemption form which immunization(s) will be postponed, the specific nature of the medical condition or circumstance that precludes immunization, and the date when the exemption ends or when the child is to be immunized. Once the length of time for the exemption has ended, the child must receive the necessary immunization(s) or be subject to exclusion from school or child care.

There is only one type of ADHS medical exemption form; there is a section for the physician to mark "Temporary" or "Permanent" depending on the nature of the child's condition. To attend child care or school, medically exempted children must receive all other vaccines except those listed on the exemption.

• Laboratory Evidence of Immunity/Disease History - If the child has history of having had a vaccine-preventable disease and the parent does not want the child immunized against the disease, proof of immunity to that disease must be submitted. A copy of the laboratory results that prove immunity must be kept on file, along with the ADHS Medical Exemption Form completed by the child's physician or nurse practitioner and parent/guardian. A Medical Exemption Form with laboratory evidence of immunity is now required by state law for reported history of disease for measles, rubella and varicella. A general physician statement of immunity is not allowable. For all other diseases, the Medical Exemption Form may contain either laboratory evidence of immunity or a physician statement of verified disease history.

Parents may sometimes submit a letter or prescription note signed by a medical provider because the parent does not want their child to receive a specific vaccine or the child is on an 'alternative schedule' for immunizations. **These are not acceptable or valid medical exemptions**. Contact the parent and/or the physician to let them know that the submitted format is not a valid medical exemption form.

Personal Beliefs Exemption:

For a child attending school in grades K-12, the child may be exempted from the applicable immunization requirements if the child's parent submits to the school a signed <u>ADHS Personal Beliefs Exemption Form</u> testifying that immunizations are against the personal beliefs of the parent. Each section of the Personal Beliefs Exemption Form must be completed and signed by the parent/guardian. This exemption only applies to students in grades K-12. **Child care centers, preschools and Head Start may not use personal belief exemptions.**

Religious Beliefs Exemption:

For a child attending child care or preschool, the child may be exempted from the applicable immunization requirements if the child's parent submits to the child care facility a signed <u>ADHS</u> <u>Religious Beliefs Exemption Form</u> testifying that immunizations are against the religious beliefs of the parent. The Religious Beliefs Exemption Form must be completed and signed by the parent/guardian. This exemption only applies to child care centers, preschool and Head Start. **Grades K-12 may not use religious belief exemptions.**

NOTE: In the event of an outbreak of a vaccine-preventable disease, children who are exempt from vaccination for reasons other than laboratory evidence of immunity may be excluded from school or child care until the risk period for exposure ends. Schools and child care centers should seek guidance from their local county health department before excluding exempted children.

When Exemption Forms are to be Completed/Resubmitted:

- When the student enrolls in a new school and the parent requests an exemption
- When a student transfers from one school to another with or without an existing exemption form
- When a new vaccine is required for age or vaccine requirements change
- When the ADHS exemption forms or format changes. Specific instructions and guidance will be provided by ADHS when this occurs.
- Medical Exemptions may extend through the school life of a student and do not need to be resubmitted. If the Medical Exemption is on a form dated earlier than July 2013 we recommend you evaluate the form closely to ensure it is a valid, permanent medical exemption. If not, a new ADHS medical exemption form should be completed.

Schools/child care centers may choose to require exemption forms be submitted more frequently than is stated above. As school and child care facility staff review exemption forms, they should check to see if the most current version of any exemption form is being used. Forms that are older versions of the most current form found on the AZDHS website should be redone/resubmitted.

Foster Child Guidance Regarding Exemptions:

The Arizona Department of Child Safety (DCS) states that licensed foster parents cannot impose their vaccine hesitancy beliefs on foster children and are not authorized to request a school or child care vaccine exemption for a foster child. DCS policy is that foster children must be fully immunized unless there is a medical contraindication, which would then require an ADHS Medical Exemption Form to be completed. If there is a foster child whose parental rights have not yet been terminated and foster parents are asking a school or child care for a vaccine exemption because the actual parents do not want the child immunized, then DCS will go to court to get the authority to have the foster children properly immunized.

For further information on DCS policy regarding foster children, please contact the DCS Medical Director who will check with the DCS worker to determine the situation and what needs to be done to have this child properly immunized.

Contact information for the DCS Medical Director is listed below.

Sara Park, MD

DCS Medical Director Phone: 602-771-3638 Email: spark@azdes.gov/ https://dcs.az.gov/

Immunization Records

Acceptable Immunization Records:

Before a child may enter or attend any Arizona school or child care center (public/charter, private, or parochial), Arizona law requires that documentary proof of school required immunizations be presented to the school or child care staff by the parent. The immunization record is usually given to parents by their doctor or health care clinic. The personal immunization record must:

- Identify the student by name and date of birth
- Show the date (day, month and year) each required vaccine dose was received
- Indicate the type of vaccine administered/received
- Include the name, signature (initials, stamp or symbol) of the healthcare provider or agency that administered the vaccines

To meet Arizona requirements for immunization records, the dates of all vaccine doses must contain the month, day and year the vaccine was administered. A record with check marks, "up-to-date", "all requirements met", or "series is complete" instead of dates is not acceptable.

Acceptable forms of immunization records to enter school or child care include:

- A copy of the Arizona Lifetime Immunization Record (aka Blue Book)
- A copy of a vaccine administration record, either electronic or hard copy, from the healthcare provider
- A computer-generated immunization record from the <u>Arizona State Immunization</u> <u>Information System (ASIIS)</u> or from an immunization registry of another state
- A signed and dated <u>Arizona School Immunization Record (ASIR 109R)</u> completed by staff at the school the child has previously attended
- A signed and dated immunization record generated by a school's vaccination information system or immunization software system which includes the child's name, date of birth, types of vaccines administered and immunization dates, as well as the school name, address, and contact person
- An immunization record or school/child care immunization record from another state or country (may or may not be signed)
- An immunization record from MyIR (My Immunization Record). MyIR is a (non-ADHS) program where parents/individuals have access to review and print out a current immunization record (from ASIIS or another state registry) on their own.

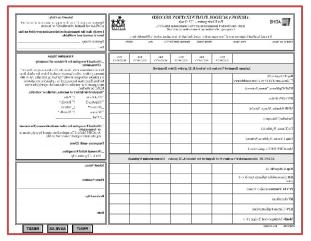
School staff should refer parents without records to their healthcare provider. If they have no provider, they can be referred to their local/county health department.

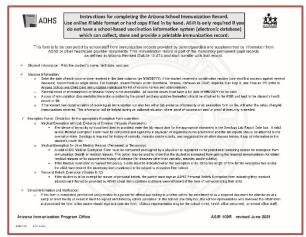
Documentation for Schools:

The definition of a document is "information in written, photographic, electronic, or other permanent form". Forms of acceptable school immunization documentation include the <u>Arizona School Immunization Record</u> (ASIR), which is the state-provided form OR a school-based vaccination information system, which is an electronic database used and maintained by a school or group of schools for the storage of immunization data.

If your school health office vaccination information system can collect and store student immunization information, and can also provide a print-out which contains vaccination information as outlined in R9-6-704 (A2), then you are not required to also complete the ASIR. The school software print-out should include facility information and contact name and, when used for an official document to give to parents or another school, contain a signature. It is an individual facility/district decision to continue to use the ASIR in conjunction with the school- based vaccination information system.

If your school health office does **not** have a software program or vaccination information system which can collect and store vaccination data or print out a record, then you **are required** to use the ASIR - either the hard copy or the <u>online fillable version</u>. The ASIR forms are available free of charge from the Arizona Immunization Program Office and may be requested by using the <u>Immunization Forms Order Request</u>. Instructions for completing the ASIR are on the back of the card.





School staff/health office personnel are to enter all available immunization data into their method of documentation, especially the immunization dates. AIPO does not endorse any of the software programs available to schools. The choice lies with each school/district, but schools should take into consideration the ability for the software to be designed to follow the ACIP recommended vaccine schedule as well as the Arizona school requirements. In addition, some school-based software programs have internal designed "reports" to assist in capturing data needed to complete the annual Immunization Data Report (IDR). Steps should be taken to update these "reports" annually/more frequently in order to be consistent with the state-provided IDR questions.

For schools that are using the hard copy of the ASIR, it makes sense to keep the ASIR in the student's health file. If using the online fillable ASIR or a school-based vaccination information system, then a copy may be kept on the school computer system. It is no longer a requirement to have a copy of the ASIR or the print-out from the school vaccination information system in each student's health file; however, it is important to note that ADHS is not responsible for any facility computer and/or software system failure and schools should consider how to access these records in the event of computer failure or destruction. Access to records must be available to state and county health departments upon request.

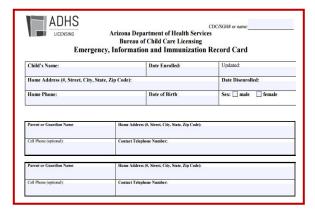
NOTE: It is a requirement that the school maintain readily available lists of children who do not have documentary proof of required vaccinations or documented immunity to vaccine-preventable

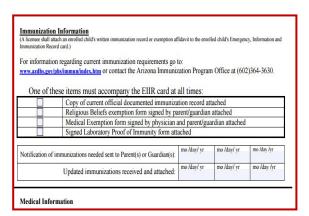
diseases, including those with an exemption form on file. These lists are necessary during county or state-declared vaccine-preventable disease outbreak situations.

Documentation for Preschools/Child Care Centers:

The Emergency, Information, and Immunization Record Card (EIIRC 201) is the form required by the Bureau of Child Care Licensing to be used in licensed child care facilities and child care group homes. A copy of an enrolled child's immunization record(s) and/or exemption form must be attached to the Emergency, Information, and Immunization Record Card. The EIIRCs also contain vital emergency information as well as immunization data. These cards must be stored on facility premises in a place which allows ready access to the card in the event of an emergency at, or evacuation of, the facility. The EIIRC must be kept readily available during the child's attendance at the child care facility and is to be kept in a separate file on facility premises for one year after the child leaves the center according to R9-5-304(D)(2).

The Emergency Immunization and Information Record Card can be obtained from the Bureau of Child Care Licensing website at <u>EIIRC 201</u>. Additional information on procedures for records and immunization requirements can be found on <u>the website</u>.





If your child care facility has a software program which can collect and store student immunization information, and can also provide a print-out which contains vaccination information as outlined in R9-6-704 (A)(2), then you may print this out and attach it to the EIIRC 201. The child care software print-out should include facility information and contact name and signature. At a minimum, the original immunization records received from the parent should be maintained in the student health file. While the ASIR is designed for use in K-12 schools, it may be used in child care facilities to record vaccinations and it will be the individual facility's decision to use the ASIR.

When using electronic databases, it is important to note that ADHS is not responsible for any computer and/or software system failure and facilities should consider how to access these records in the event of computer failure or destruction. Access to records must be available to state and county health departments upon request.

NOTE: It is a requirement that the child care facility maintain readily available lists of children who do not have documentary proof of required vaccinations or documented immunity to VPDs, including those with an exemption form on file. These lists are necessary during county or state-declared vaccine-preventable disease outbreak situations.

Privacy of Immunization Records:

This is intended only as information. It is not legal advice.

In accordance with <u>A.R.S 15-874</u>, school and child care immunization records or documents are open to inspection by the Arizona Department of Health Services and local county health departments and must be made available upon request.

HIPAA https://www.hhs.gov/hipaa/index.html

The Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule (Section 164.512(b)(1)(i)) recognizes the legitimate need for public health authorities and others responsible for ensuring public health and safety to have access to protected health information to carry out their public health mission. The Privacy Rule permits a covered entity (such as a healthcare provider) to disclose proof of a student's immunizations directly to a school with the parent or guardian's agreement. The agreement may be orally or in writing. https://www.hhs.gov/hipaa/for-professionals/faq/1507/is-a-health-care-provider-permitted-to-disclose-proof-of-a-childs-immunizations/index.html

FERPA https://www2.ed.gov/policy/gen/guid/fpco/ferpa/index.html

The Family Educational Rights and Privacy Act (FERPA) law protects the privacy of student education records, including immunization records submitted to the school. This law applies to educational agencies or institutions that get funding from the United States Department of Education. HIPAA rules do not apply to education records. Once immunization records are provided to the school, preschool, or child care, it becomes a part of the student education record and is covered under FERPA laws.

Retaining or Storing of Immunization Records:

The student immunization record- either the ASIR or a printout from the school-based immunization information system- becomes part of the pupil's permanent file and should reflect the most relevant and current information. At a minimum, the original immunization records received from the parent should be maintained in the student health file. This original documentation helps to support the school record information. When an updated immunization record is provided to the school, older or duplicate records may then be destroyed, as long as all dates on the ASIR or in the school vaccination information system are supported by the documentation. In some instances, there may be several immunization records that together complete the school record.

In accordance with records retention standards and guidance set forth by the <u>Arizona State Library</u>, <u>Archives</u>, <u>and Public Records</u> (L.A.P.R.), schools and/or districts should have a process in place for transferring and archiving school records, including immunization records, either hard copy or electronic. Whenever a student leaves the school, the cumulative folder- including the immunization record- is to be sent to the new school. The sending district or school must also make and retain a copy of the cumulative record which includes a copy of the student's immunization record.

A student's immunization records are considered to be historical and part of the Permanent Student Record, which is to be archived and kept in perpetuity after the student graduates or terminates schooling. Please check your school or district policy on records retention and procedures. The <u>L.A.P.R.</u> provides guidance on retention schedules and FAQs for School Districts and Charter Schools can be found at here.

Required Annual Immunization Reporting

Arizona Revised Statutes and Administrative Code require that schools and child care centers submit an annual Immunization Data Report (IDR) to the Arizona Department of Health Services (ADHS). **The Immunization Data Report is due no later than November 15**th **each year**.

Child care centers and schools are required to report the immunization status of students enrolled in child care/preschool, kindergarten and sixth grade. The data is submitted to ADHS through an online web-based Immunization Data Report (IDR). Links to the online app, instructional slides of how to complete the IDR, and additional resources can be found on the AIPO <u>IDR webpage</u>. The online report is available for child care centers and schools to enter their data beginning in September of each year.

Upon completion of the online web-based Immunization Data Report, the staff member who completes the report(s) is encouraged to print a copy of the report for the school administrator to review or to keep on file. The printed report lists the percentage of students who are fully immunized, and therefore protected, for each type of vaccine, as well as the percentage of students who are exempt. The IDR also lists the level of compliance with the immunization laws and requirements.

The IDR school and child care immunization coverage levels and information is listed on the AIPO website in a <u>searchable database</u> on the <u>Statistics and Reports web page</u> and is available to the general public and parents, schools, local county health departments, the Arizona Department of Education and the ADHS Child Care Facilities Licensing Division. The immunization program analyzes these reports to identify communities that are at higher risk of outbreaks of vaccine preventable. A summary of kindergarten immunization data is also submitted to the Centers for Disease Control and Prevention (CDC) in an annual report.

Special On-Site Validation Surveys:

Each year, usually in the spring, ADHS/AIPO and local health department staff visit a random sampling of schools and child care facilities to check understanding of and compliance with immunization requirements and effectiveness of follow-up. These validation surveys are desired by the CDC to ensure that schools/facilities are accurately reporting the Immunization Data Reports (IDRs).

Programs can be selected for an on-site visit for any reason, at the discretion of the AIPO. Schools may also be randomly selected by the CDC. Arizona Immunization Program staff and county health department staff will work with the selected schools and child care programs to schedule the validation visits at the selected sites.

Validation surveys are an excellent time to provide one-on-one training for the school or child care facility, stress the importance of the immunization review process, and answer any questions. It is also a good opportunity to encourage sites to use ASIIS and share information about other programs available from the health department.

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Other visits may be made or reports may be required if disease outbreaks or other problems relating to immunizations occur. A.R.S 15-874 grants the Arizona Department of Health Services and local county health departments access to child care and school immunization records.

State Immunization Registry - ASIIS

The <u>Arizona State Immunization Information System (ASIIS)</u> is a lifetime immunization registry that collects, stores, analyzes, and reports immunization data which is entered by immunization providers, such as physician offices, county/local health departments (CHDs), hospitals, pharmacists. Anyone who provides immunizations can enter data into ASIIS as an enrolled user. ASIIS vaccination scheduling, forecasting, and intervals are based on ACIP recommendations and may differ slightly from Arizona school requirements.

Arizona law requires all immunizers who provide vaccines to children 0 through 18 years of age to enter the data into ASIIS. Also, all enrolled Vaccines for Children (VFC) providers, CHDs, and pharmacists are required to enter all data (adults and children) into ASIIS. While not all providers enter their data, the ASIIS registry still serves as an excellent source of information.

School and child care facilities may sign up for "view-only" access to look up their student immunization records. Access to ASIIS can assist schools and child care centers in determining if students meet immunization requirements. We encourage your facility staff to use ASIIS records to review immunization information for your students. Visit the <u>ASIIS</u> enrollment webpage for more information and to enroll as a <u>View Only Access user</u>.

Most states have their own version of an immunization information system (IIS) and currently the data in not interchangeable or sharable due to privacy concerns. If you have a student who is enrolling from another state and the parent does not have vaccination records, visit the CDC list for <u>Contacts for IIS Immunization Records</u>. You may be able to contact the state in question or provide the contact information to the parent so they can reach out and contact their previous state for a record of immunizations. Most states will have a records request form that needs to be completed in order to obtain the vaccination record.

Arizona MyIR

Arizona MyIR is a partnership between the Arizona Department of Health Services Immunization Program and Scientific Technologies Corporation. <u>Arizona MyIR</u> is a free website service that allows consumers to view and print copies of their own official vaccination records stored in the Arizona State Immunization Information System, ASIIS. Consumers can also obtain a QR code from MyIR for proof of COVID vaccines. When presented with an immunization record from MyIR, school and child care staff may accept it as an official record. Staff can log on to ASIIS to verify the data is correct.

Immunization records can also be obtained by submitting the online application <u>ADHS</u>

<u>Immunization Record Request Form</u> and further questions or concerns can be addressed to the Records Team at <u>Immunization Record@azdhs.gov.</u>

Review, Follow-up & Referral Procedures

It is the responsibility of school and child care staff to review and follow-up on all children admitted on a conditional basis who require immunizations in the future to complete an immunization series. Schools may also need to follow-up on transfer students when awaiting arrival of records from prior schools. Here are some suggestions for your use as you develop your follow-up system.

Your follow-up system should include:

- **1.** Keeping lists of unimmunized (exempt or conditional admission) children to refer to in case of vaccine-preventable disease outbreak.
- **2.** Reviewing your records monthly.
- **3.** Using the shortest interval to complete immunizations; for example, when a conditionally admitted child is in the 6- to 12-month interval between doses of DTaP, target the 6 months date for receiving the next dose rather than using the maximum 12 months. Notify parents of when the next dose is due, but also caution not to get the dose before the minimum interval is reached.
- **4.** Keeping contact with the parents. Provide parents with the school or child care requirements forms and use the screening and referral forms specific to the grade. If the parent does not come in with an updated record from a health care practitioner, the law requires that the child (unless exempt) be excluded from further school/child care attendance until proof of adequate immunization is presented.
- **5.** Excluding children who do not meet requirements by the exclusion date. Most parents will comply with requirements when they know their child must be excluded. If you need to exclude a child, usually the student's family quickly comes into compliance with the requirements and the child is back in school as a result. However, the Screening and Referral Forms and documentation of your follow-up efforts will provide the information you need for due process. ADHS does not have a template for an exclusion letter.

Described below are a few suggestions for follow-up systems. Choose whichever system is best for you or create your own.

System 1 – School-based software system/ASIR/EIIRC Folder

- Keep a separate file of the documents (print-out from school software program, ASIRs or EIIRCs) of children needing follow-up. For schools, because immunization records are part of the child's permanent record, make sure that any immunization documents or records are transferred with the cumulative folder if the child changes schools.
- Clip a note with the due date onto the software print-out, ASIR, or EIIRC.
- At the beginning of each month, call, email or send parents a letter (use the Screening and Referral Forms) to remind them that shots are due and include the deadline date. Include information about your school's exclusion policy if the child is not immunized by the deadline.
- Enter immunization dates into the vaccination information system/software, onto the ASIR, and attach to the EIIRC when the medical or clinic record is presented by parents to verify the child's immunization status.

- Repeat the steps above if additional immunizations will be needed in the future, until all requirements are met.
- Exclude students who do not provide evidence of up-to-date immunizations by the exclusion date.
- When no more vaccine doses are needed, remove the documents from the follow-up file, and return it to the student's health file or child care file. The child is now in a complete status.

System 2 – Computerized Student Information Systems

Schools with computerized vaccination information systems, such as SNAP, Synergy, Power Schools, School Master (and many others) can run reports or create lists of students due for immunizations. Capabilities will vary according to the system your school or child care center uses. AIPO does not endorse or recommend any specific system and cannot provide technical assistance for any of the school-based software systems.

AIPO is aware that not all school vaccination information systems are the same and that some systems are not as nuanced to the requirements and intervals specified by ACIP and accepted by ADHS. It is up to your system administrator to make sure that your software system algorithms are kept up-to-date with both the Arizona requirements and the ACIP recommendations. If you get error messages or feel your system is incorrectly flagging a vaccination or date, you may call the Arizona Immunization Program Office at 602-364-3630 for clinical assistance in validating the dates.

System 3 - Index Card File

- A card file requires 3"x 5" index cards, a box to hold them, and a set of monthly index cards (January-December).
- For a child needing future immunizations, enter his or her name on an index card and list all doses which will be needed. Using the <u>Arizona Guide to Immunizations Required for Entry: Child Care and Preschool</u> or the <u>Arizona Guide to Immunizations Required for School Entry: Grades K-12</u>, determine the first day of the time interval when the next dose is first due and note the due date on the upper right-hand corner of the follow-up card.
- File each follow-up card by the month the immunization is due.
- At the beginning of each month, call, email or send parents a letter (use the Screening and Referral Forms) to remind them that shots are due and include the deadline date. Encourage parents to have their child receive the next dose at the beginning of the time interval. Note the exclusion date as the day after the deadline date. Be sure to document on the index card the date the notice was sent.
- Enter immunization dates on the vaccination information system or ASIR or attach to the EIIRC when the immunization record is presented by parents to verify the child's immunization status.
- Repeat the steps above if additional immunizations will be needed in the future until all requirements are met.
- Exclude children who do not provide evidence of up-to-date immunizations by the exclusion
- When no more immunizations are needed, remove the card from the file box and discard. The child is now in a complete status.

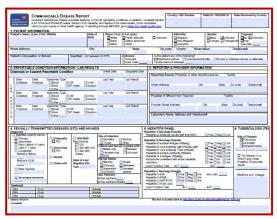
System 4 - Calendar

A calendar system may work well in a family child care home or in a small school or center. Use a calendar with large spaces for each day to note the name of the child on the first day of the time interval an immunization is first due. To preserve confidentiality, the calendar should not be hung where it is visible to parents or the public. Child care facilities and schools may also choose to set reminders within their electronic or internet-based calendars such as Google or Microsoft Outlook Calendar.

Disease Reporting Requirements

Reporting Communicable Diseases:

The ADHS <u>Office of Infectious Disease Services</u> lists diseases that must be reported by school or child care personnel to the county/local health department according to Arizona Administrative Code <u>R9-6-201 through 207</u>. Note that some of these diseases must be reported immediately by phone. Reporting forms can be found at http://www.azdhs.gov/phs/oids/pdf/forms/cdr form.pdf.





ADHS/AIPO requests that schools and child care providers report all cases of measles, any rumors of measles, and any illness with both rash and fever to your county health department by telephone. Please do not wait until the child returns to child care or school before making the telephone report. Do not call the AIPO to report a suspected or confirmed case. Please call your county local health department.

Disease Outbreaks:

The Health Officer of a county health department/local health jurisdiction has the authority to take all appropriate actions necessary to control or eliminate the spread of disease. County Health Departments also work with state health department officials, the Superintendent of Schools, and the Governor's office as needed/in special circumstances to develop directives and guidance. School and child care staff must follow these directives to support public health actions.

If an outbreak is declared:

- Cooperate with the local health department's directives.
- Identify students and staff exposed to the disease.
- Review immunization records to identify susceptible students and staff.
- <u>Contact your local health department</u> to determine if susceptible students should be excluded until the danger of the outbreak passes.
- Communicate with parents, students and staff and provide information from and as directed by the local health department.
- Review the ADHS <u>Infectious Disease Flip Chart</u> for information about specific diseases.

Vaccine-Preventable Diseases

Arizona's school and child care immunization requirements help protect children against the following diseases. For more information about these and other vaccine-preventable diseases that can be shared with parents, visit the Centers for Disease Control and Prevention (CDC) website for parents on <u>Diseases & the Vaccines that Prevent Them</u>.

<u>Diphtheria</u> – A contagious and potentially life-threatening bacterial infection that affects the nose, throat and skin. The bacteria produce a toxin that can cause life-threatening swelling of the neck and can also affect the heart and nervous system. Diphtheria is spread by coughing or sneezing.

<u>Tetanus</u> – Sometimes known as lockjaw, a severe bacterial infection that affects the body's muscles and nerves. The bacteria live in dirt and the intestines and feces of animals and enter the body through cuts, punctures, or other wounds. Tetanus can cause serious illness and has been fatal in 11% of reported cases.

<u>Pertussis</u> – A serious disease, especially for babies, commonly called "whooping cough". It is extremely contagious and spreads easily through coughing and sneezing. Most babies who get pertussis have to be hospitalized and some die. Most babies who get pertussis are infected by an adult or older child.

<u>Polio</u> – A highly contagious viral disease that can invade the nervous system. It can cause severe illness, paralysis, and death. The virus lives in the throat and intestines of an infected person and usually spreads to other people through contact with feces.

<u>Measles</u> – Measles spreads when a person infected with the measles virus breathes, coughs, or sneezes. It is very contagious and spreads quickly and easily between people and can cause serious illness, especially in children. Severe cases can cause death.

<u>Mumps</u> – A contagious viral disease that spreads through coughing, sneezing, or casual contact with an infected person. The virus causes swelling in the cheeks or jaw and neck areas. Serious complications include deafness, meningitis (infection of the brain and spinal cord covering) and a painful swelling of the testicles or ovaries.

<u>Rubella</u> – Also known as German measles or three-day measles, a contagious viral infection that can strike children and adults and is very dangerous for pregnant women and their unborn babies. It spreads through coughing, sneezing, or just talking with an infected person.

<u>Hib (Haemophilus influenzae type b)</u> – Bacterial disease that is very dangerous to children under five years old and even more dangerous to infants. It is caused by contact with an infected person. Disease-causing bacteria enter the body through the nose and throat.

<u>Hepatitis A</u> – Liver disease caused by a virus. It is transmitted by swallowing the virus (fecaloral route). The disease spreads through contact with someone who has hepatitis A or not washing hands after going to the bathroom and then preparing or touching food.

<u>Hepatitis B</u> – Serious liver infection caused by a virus that spreads through contact with infected blood or body fluids. Babies can be infected during childbirth if the mother is infected. Chronic cases can result in liver failure, cancer, or cirrhosis.

<u>Varicella (chickenpox)</u> – A highly contagious viral infection that causes small, itchy blisters on the skin. It can be especially serious in teenagers and adults who have never had the disease. It is spread through coughing, sneezing, and contact with an infected person's chickenpox sores.

Meningococcal disease – A bacterial illness which can be very severe, causing hospitalization, loss of limbs, or death. The disease commonly causes bacterial meningitis, an infection of the covering of the brain and spinal cord. It can also cause infections in the blood. The bacteria are spread from person-to-person through the exchange of respiratory and throat secretions (saliva or spit) during close contact.

Common Vaccine Names and Abbreviations

The following is a list of terms you may encounter on immunization records. When combination vaccines are given, they should be recorded under each individual component, not as the combination.

Names with an asterisk (*) identify vaccines that are not available or no longer used in the United States, but may have been given in previous years or in different countries.

*Cervarix
*Comvax

*Gardasil

Bivalent HPV vaccine, 2vHPV
Hib and Hep B vaccine
4 valent HPV, quadrivalent

*<u>M</u> Measles vaccine only – does not count as MMR

*Menomune Meningococcal polysaccharide vaccine (MPSV4) – quadrivalent, ACWY

*MenA Monovalent meningoccal vaccine – A serotype *MenC Monovalent meningoccal vaccine – C serotype

*MenC/Y Bivalent meningococcal vaccine, MenHibrix, serotype C and Y

*OPV Oral Polio vaccine

*PCV7 Pneumococcal conjugate vaccine—7 valent

ActHib Hib vaccine
Adacel Tdap vaccine

Bexsero Meningococcal B (OMV) vaccine

Boostrix Tdap vaccine

DT Diphtheria and Tetanus pediatric vaccine

DTaP Diphtheria, Tetanus and acellular Pertussis pediatric vaccine

DTP Diphtheria, Tetanus and Pertussis vaccine

Flu Influenza – brand names include Afluria, Fluarix, Flulaval, Flublok, FluMist, Fluvirin,

Flucelvax, Fluad and Fluzone

Gardasil9 9 valent HPV
GG Gamma Globulin
Havrix Hepatitis A vaccine

Hep A Hepatitis A Hep B Hepatitis B

<u>Hib</u> Haemophilus influenzae type B

<u>Hiberix</u> Hib vaccine

HPV Human papillomavirus
IG Immune Globulin

IPOL IPV

<u>IPV</u> Injectable Inactivated Polio vaccine

Kinrix DTaP and IPV vaccine

MenACWY Meningococcal conjugate vaccine (MCV4) – quadrivalent

Meningococcal conjugate vaccine (MCV4P) - quadrivalent, MenACWY

MenB Meningococcal B vaccine

MenQuadfi Meningogoccal polysaccharide (groups A,C, Y, W-135) TT conjugate, quadrivalent

Meningococcal conjugate vaccine (MPSV4O)- quadrivalent, MenACWY

MMR Measles, Mumps and Rubella vaccine

MMRV Measles, Mumps, Rubella and Varicella vaccine Preumococcal conjugate vaccine—13 valent

Common Vaccine Names and Abbreviations - cont.

<u>Pediarix</u> DTaP, Polio (IPV) and Hepatitis B vaccine

PedvaxHib Hib Vaccine

Pentacel DTaP, Polio (IPV) and Hib vaccine

Pneumovax Pneumococcal polysaccharide vaccine, 23 valent, PPSV23

PPSV23 Pneumococcal polysaccharide vaccine, 23 valent

PPD Purified Protein Derivative (TB Skin test), also Tine, Mantoux

<u>Prevnar</u> Pneumococcal conjugate vaccine, PCV13
ProQuad Measles, Mumps, Rubella and Varicella vaccine

Quadracel
RotarixDTaP and IPV vaccineRotavirus vaccineRotavirus vaccineRotavirus vaccine

Tetanus and Diphtheria vaccine, adult

<u>Tdap</u> Tetanus, Diphtheria, and acellular Pertussis vaccine

<u>Tenivac</u> Tetanus and Diphtheria vaccine, adult

<u>Trumenba</u> Meningococcal B (PRP) vaccine

<u>Vaqta</u> Hepatitis A vaccine <u>VAR</u> Chickenpox vaccine

<u>Varicella</u> Chickenpox

<u>Varivax</u> Chickenpox vaccine

Vaxelis DTaP, Polio (IPV), Hib, and Hepatitis B vaccine

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Important Telephone Numbers

State Offices

•	Arizona Immunization Program Office (AIPO)	602.364.3630
•	Arizona State Immunization Information System (ASIIS)	602.364.3899
	o <u>Toll-Free Number</u>	877.491.5741
•	Arizona Department of Education - School Safety & Social Wellness	602.542.8700
•	ADHS - Child Care Facilities Licensing - Home	602.364.2539
Co	ounty Offices	
•	Apache County Public Health Services District	928.333.2415
•	Cochise Health and Social Services	520.432.9400
•	Coconino County Public Health Services District	928.679.7272
•	Gila County Division of Health & Emergency Services	928.425.3189
•	Graham County Health Department	928.428.0110
•	Greenlee County Health Department	928.865.2601
•	La Paz County Health Department	928.669.1100
•	Maricopa County Department of Public Health	602.506.6900
	o Immunization Program & Communicable Disease Reporting	602.506.6767
•	Mohave County Department of Public Health	928.753.0714
•	Navajo County Public Health Services District	928.532.6050
•	Pima County Health Department	520.724.7988
	o <u>Immunization Program</u>	520.724.7763
•	Pinal County Public Health Services District	520.866.7358
•	Santa Cruz County Health Department	520.375.7900
	o Mariposa Community Health Center for Santa Cruz	520.281.1550
•	Yavapai County Community Health Services	
•	Yuma County Public Health Services District	928.317.4559

Additional Resources

Laws -Rules-Statutes

- Arizona Revised Statutes 15-871 through 15-874 http://www.azleg.gov/arsDetail/?title=15
- Arizona Administrative Code, Title 9, Chapter 6, Article 7
 http://apps.azsos.gov/public_services/Title_09/9-06.pdf

Arizona Department of Health Services

- Arizona Department of Health Services https://azdhs.gov/
- Arizona Immunization Program Office Homepage https://azdhs.gov/phs/immunization
- ADHS/AIPO School and Child Care Forms and Guidance https://azdhs.gov/shots4schoolaz
- Arizona State Immunization Information System (ASIIS) https://www.azdhs.gov/preparedness/epidemiology-disease-control/immunization/asiis/index.php

Arizona Department of Education

- Arizona Department of Education http://www.azed.gov/
- Arizona Department of Education School Safety and Social Wellness https://www.azed.gov/wellness
- Arizona Department of Education Office of Homeless Education https://www.azed.gov/homeless/
- ADHS Child Care Facilities Licensing Bureau http://www.azdhs.gov/licensing/childcare-facilities/index.php

College Information

 American College Health Association (ACHA) http://www.acha.org/

Vaccine Resources

- The Arizona Partnership for Immunization (TAPI) http://www.whyimmunize.org/
- MyIR (My Immunization Record) https://myir.net
- Centers for Disease Control & Prevention, Vaccines http://www.cdc.gov/vaccines/
- American Academy of Pediatrics (AAP) http://www.aap.org
- Immunization Action Coalition http://www.immunize.org/
- Immunization Action Coalition Ask the Expert https://www.immunize.org/askexperts/
- Pink Book: Epidemiology and Prevention of Vaccine-Preventable Diseases https://www.cdc.gov/vaccines/pubs/pinkbook/index.html
- Vaccine Adverse Event Reporting System (VAERS) https://vaers.hhs.gov/