School Immunization Law
Changes

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FERPA and Immunization Records

‘At the elementary or secondary level, students’ immunization and other health records that are maintained by a school district ... are “education records” subject to FERPA...’

FERPA and Immunization Records

• FERPA protection applies to vaccination records that are maintained by a school nurse who is employed by a school/school district and by a school nurse that is under contract to the school/school district.

• The vaccination records in both cases are considered “education records”.
Why were changes needed in Wisconsin?

Current administrative code DHS 144.07(4)(1) (a) b)
   • a) The school shall report to the local health department and the day care center shall report to both the local health department and the department:
      – 1. The degree of compliance with s. 252.04, Stats., and this chapter by students in that school or day care center.
      – 2. The name and immunization history of any incompletely immunized student, including those students with waivers and those students in the process of being immunized.

Current state law 252.04 (6)
   • The school, child care center, or nursery school shall notify the district attorney of the county in which the student resides of any minor student who fails to present written evidence of completed immunizations or a written waiver under sub. (3) within 60 school days after being admitted to the school, child care center, or nursery school...

However
   • FERPA allows information sharing without parent consent only in the event of an outbreak or emergency
      – Health or safety emergencies must be related to an actual, impending or imminent emergency
      – Determined on case by case basis
      – Must be articulable and significant threat
      – In this situation, disclosure is limited to the period of the emergency.

Dale King, Director, Family Privacy Compliance Officer, U.S. Dept of Education, January 25, 2015
School Immunization Assessment

• Past practice was for school districts to report the information required by statute to local health departments and district attorney offices as mandated.

• Currently, in a time of increasing attention to and safeguards on the privacy of student data.

• As a result, DHS reviewed practices and determined that changes were needed.
What Is Different for the 2015-16 Year?

Follow up and enforcement related to the school immunization law is now done by the school (if private school) or school district

– Include only aggregate data in the Local Public Health Report
– Do not send the noncompliance list to the Local Public Health Department
– Discontinue the District Attorney Report
What Is The Same?

Everything else

• Timeline/parent notification
  – Legal letter 15\textsuperscript{th}, 25\textsuperscript{th}, and 80\textsuperscript{th} days
  – Exclusion 30\textsuperscript{th} day
  – Revised Local Public Health Report 40\textsuperscript{th} day

• Mandatory exclusion for districts at < 99\% compliance at the 30\textsuperscript{th} day
What Can Schools Do To Maintain and Improve Immunization Compliance?

• Collaborate with your local health department
  – Meet with local health department each year to review your aggregate data
    • Note trends (schools with higher behind schedule or in process rates)
  – Communicate your immunization timeline to the local health department each fall (the actual dates you will be sending legal notices)

• Develop a plan to address the immunization needs of your district’s students
  – Scheduling of immunization clinics
  – Location of clinics
  – School located clinics especially during times when parents are present and/or new vaccine requirements apply
What Can Schools Do To Maintain and Improve Immunization Compliance?

Join your local Immunization Coalition

– Increase awareness of school role in immunization assessment
– Develop partnerships with coalition members from the various health care organizations and HMOs in your area
– Participate in Immunization Coalition activities including public awareness campaigns
– [https://www.dhs.wisconsin.gov/immunization/coalition.htm](https://www.dhs.wisconsin.gov/immunization/coalition.htm) for a list of Immunization Coalitions
What Can Schools Do To Maintain and Improve Immunization Compliance?

• Obtain parent consent to release immunization information to Local Health Department
  – Routine part of annual enrollment
  – Frame as school-health department partnership
  – Releases should be specific for who the information can be communicated to--provider, LHD, WIR

• Obtain parent consent for immunization information exchange with the Wisconsin Immunization Registry
  – Ensures that district has most complete info
What Can Schools Do To Maintain and Improve Immunization Compliance?

Immunization information can still be released to schools by providers and local health departments without parent consent. 

**DHS 144.03(10)(a) Between vaccine providers and schools or day care centers.** Vaccine providers shall disclose a student's immunization information, including the student's name, date of birth and gender and the day, month, year and name of vaccine administered, to a school or day care center upon written or verbal request from the school or day care center. Written or verbal permission from a student or parent is not required to release this information to a school or day care center.
What Can Schools Do to Maintain and Improve Immunization Compliance

• Exclusion
  – Powerful
  – Strategy of last resort
  – District administrative support
  – Minimize missed school time
Immunization Waiver Best Practices

As requested in August 2015 letter from DHS, schools should annually review all student immunization waivers for accuracy.

- Waivers should be removed when the students’ immunization are up to date for their grade and their immunization status is “meets minimum”.

This annual review

- improves the accuracy of student immunization status in case of a disease outbreak
- gets the most number of students in the compliant category
- improves the accuracy of statewide waiver rates.
Questions or Consultation

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