

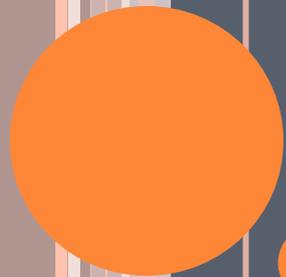
CHILD CARING FACILITIES: THE FIRST LINE OF DEFENSE AGAINST VPDs!

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TOPICS

- Immunization Rules
- Vaccine Preventable Diseases
- Resources and Tools
- What Comes Next?



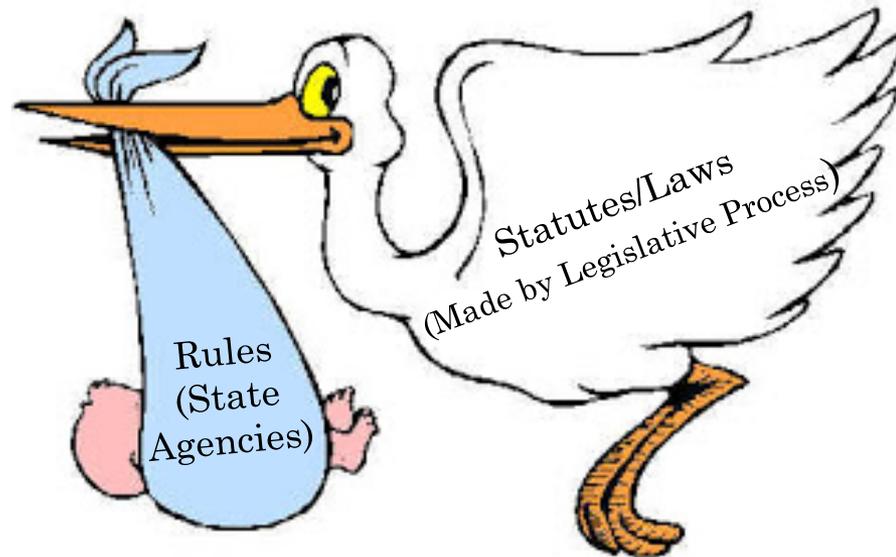


IMMUNIZATION RULES

For the Management and Control of
Communicable Diseases

WHERE DO RULES COME FROM?

- Developed by state agencies in order to carry out state laws (statutes).
- Designed to increase flexibility and efficiency in the operation of laws.
- Rule-Making Process
- Violation of rules has the same effect of violating the law.





IMMUNIZATION RULES

- Applies to children **over six (6) months of age**
- Every Child Caring Facility and School shall maintain a **record of immunization** for every pupil...
 - *This also applies to school age children**
- No Child Caring Facility Administrator shall retain any pupil **thirty (30) days after entry** without official written documented proof of immunization according to the schedule published by the State Health Officer except when there are exemptions as noted in these regulations.

IMMUNIZATION RULES: OUTBREAK

- When determined by the State Health Officer or County Health Officer, children who have been granted an Exemption and others not fully immunized against the specific disease occurring shall be excluded from attendance.
- Example:
 - There is an outbreak of whooping cough. Any child who has not received the DTAP vaccine must not attend.



USEFUL TOOLS DURING AN OUTBREAK

- Child Care Susceptible List (Exempt Children)
 - Quickly identifies vulnerable children
- Child Care Information System
 - Immunization Tracking and Notifications

Child Care Susceptible List (Exempt Children)																							
Facility:												Classroom:								Date:			
Write an "E" in the column under the vaccine or vaccine dose for which the child is exempt.																							
#	Exempt Date	Name	Birth Date	Hepatitis B			DTaP/DT				Hib				Polio			M	V	PCV			
				1	2	3	1	2	3	4	1	2	3	4	1	2	3	R	R	1	2	3	4
1																							
2																							
3																							
4																							
5																							
6																							
7																							
8																							
9																							

IMMUNIZATION RULES: REPORTS REQUIRED

- Annual report of immunization status and conditional enrollment shall be submitted to the Wyoming Department of Health.
- Not currently in place
 - Estimate initial request 2017

WHAT IS CONSIDERED A “RECORD OF IMMUNIZATION”?

- Official School Immunization Record, or
 - Infinite Campus, SNAP, PowerSchool
- Immunization Record from local or state Public Health Department, or
- Certificate signed by a licensed physician, or
- Official State Record of Immunization from the WyIR

WHAT CONSTITUTES EVIDENCE OF IMMUNIZATION HISTORY?

- Certified Laboratory Report or Acknowledgement that confirms serologic immunity, or
- Written statement from a legal guardian, school nurse, or physician attesting to a pupil's positive history of varicella disease or varicella immunity.



IMMUNIZATION EXEMPTIONS

- Only valid if they are approved by the State Health Officer or a County Health Officer.
 - State Health Officer: Dr. Wendy Braund
 - List of County Health Officers
 - <website>
- Must be maintained by the facility as part of the immunization record.

IMMUNIZATION EXEMPTIONS: MEDICAL

- A child shall not be required to have immunizations which are **medically** contraindicated.
 - A medical condition that makes a particular treatment inadvisable.
 - Ex. cancer, HIV/AIDS, previous allergic reactions, heart disease, etc.
- Signed and notarized Medical Exemption Form or a written statement from a physician.
- Must state that the administration of the **specific** immunization(s) is medically contraindicated to the child.

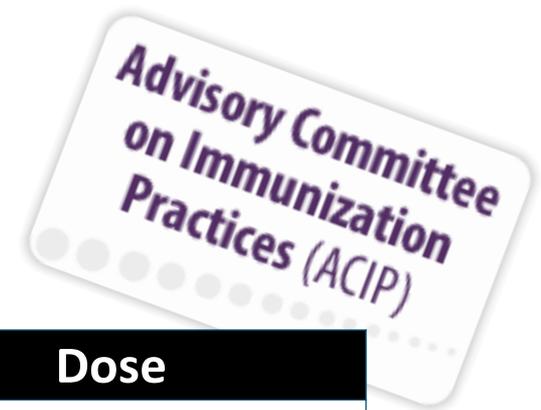
IMMUNIZATION EXEMPTIONS: RELIGIOUS

- A child is exempt from mandatory immunizations based on **evidence of a truly held and genuine religious objection.**
 - Ex. Church of Christ, Christian Scientists, etc.

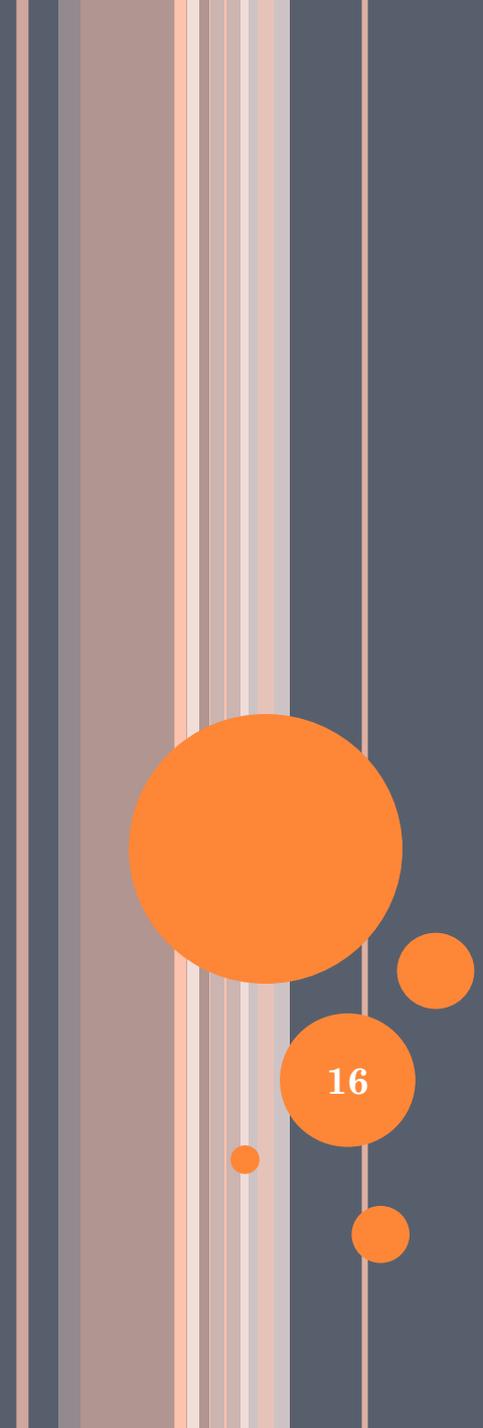
REQUIRED IMMUNIZATIONS

Child's Age	Vaccine	Dose
6 mos.	DTaP	Dose 3 of 5
	Hib	Dose 3 of 4
	Pneumococcal conjugate (PCV13)	Dose 3 of 4
	Rotavirus**	Dose 3 of 3
6 to 18 mos.	Hepatitis B	Dose 3 of 3
	Polio (IPV)	Dose 3 of 4
6 mos. + (annually)	Influenza	Dose 1 of 2
	Influenza	Dose 2 of 2

REQUIRED IMMUNIZATIONS



Child's Age	Vaccine	Dose
12 to 15 mos.	Hib	Dose 4 of 4
	Pneumococcal conjugate (PCV13)	Dose 4 of 4
	MMR	Dose 1 of 2
	Varicella	Dose 1 of 2
12 to 23 mos.	Hepatitis A	Dose 1 of 2
15 to 18 mos.	DTaP	Dose 4 of 5
18 mos. +	Hepatitis A	Dose 2 of 2 (6 mos. after Dose 1)
4 to 6 years	DTaP	Dose 5 of 5
	Polio (IPV)	Dose 4 of 4
	MMR	Dose 2 of 2
	Varicella	Dose 2 of 2



IMMUNIZATION RECORDS

Verifying Validity and Completeness

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IS THIS RECORD VALID?

- A comprehensive timeline of all vaccinations a patient has received
- Can be confusing
- A lot of vaccines given within a specific time frame



TOOLS FOR RECORD VALIDATION

- Instant Childhood Immunization Schedule
 - http://www2a.cdc.gov/nip/kidstuff/newscheduler_le/
- Immunization Schedules for Infants and Children
 - <http://www.cdc.gov/vaccines/schedules/easy-to-read/child.html>
- Validation is not necessary with records produced from the Wyoming Immunization Registry (WyIR).
 - This system is able to identify invalid doses.

RECORD FROM THE WYIR



Official State Record of Immunization

Day Care/Pre-School/Head Start/Public and Private Schools K-12
Effective June 1, 2001



This record is part of the child's or student's permanent record (cumulative folder) and shall transfer with that record. Health Department personnel shall have access to this record as deemed necessary.

Name of Child/Student: TOMMY JEROME TEST
Parent or Guardian: MOMMA
Address: 6101 YELLOWSTONE RD
City: CHEYENNE State: WYOMING

Date of Birth: 09/01/1969
Phone: (307)777-5773
P.O. Box:
Zip: 82009

Vaccine	MONTH/DAY/YEAR EACH DOSE WAS GIVEN									
	Dose 1	Dose 2	Dose 3	Dose 4	Dose 5	Dose 6	Dose 7	Dose 8	Dose 9	Dose 10
DTap/DTP/DT	03/09/2001	05/14/2001	01/01/2002	02/18/2002	01/01/2012	02/01/2012	05/01/2012	02/01/2013	02/21/2014	11/17/2014
HPV	01/01/2012	02/01/2013								
Hep A	01/01/2012	05/01/2012	11/16/2012	02/21/2014						
Hep B - 3 Dose	01/01/2002	01/01/2012	11/16/2012	02/21/2014	11/17/2014					
Hib	01/26/2001	03/09/2001	05/14/2001	02/18/2002						
Influenza	09/18/2012	02/21/2014								
OPV/IPV	01/01/2002	01/01/2012	11/17/2014							
Pneumo (PCV)	01/26/2001	03/09/2001	05/14/2001	02/18/2002						

History of Chicken Pox: none

Aug 3, 2016

Signature or Stamp of Licensed Physician/Designee, or Public Health Authority*

Date Issued

Street Address

Telephone Number

City

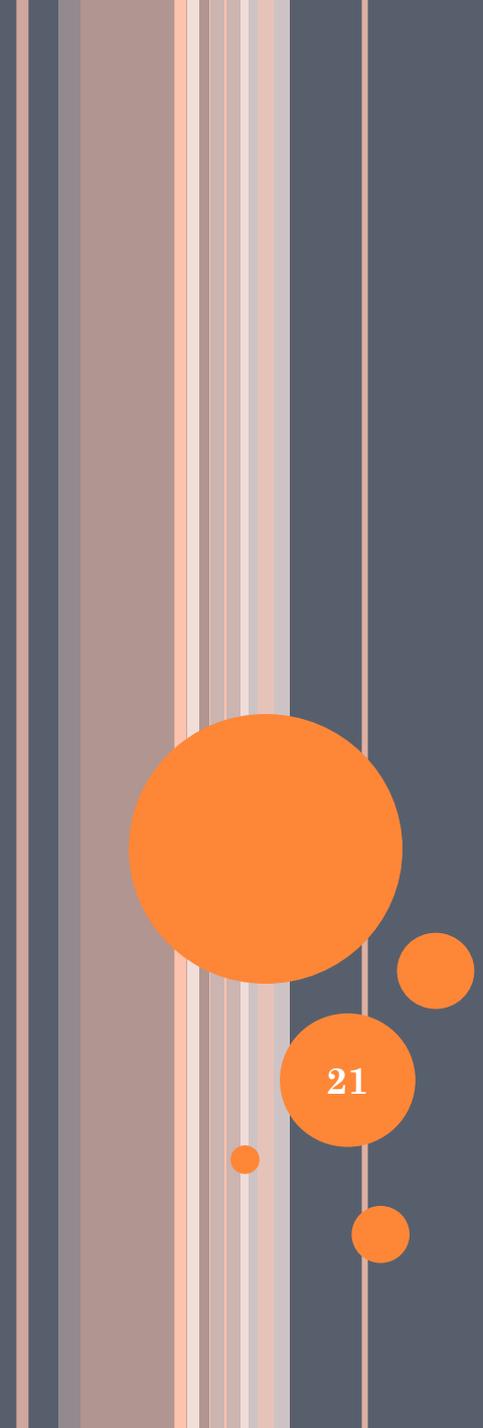
State

Zip Code

*Public Health Authority means any qualified State or Local Health Department personnel or a school nurse.

TOOLS TO UNDERSTAND IMMUNIZATION RECORDS

- Binational Immunization Resource
 - <https://www.cdc.gov/vaccines/schedules/downloads/child/binational-schedule-pr.pdf>
- Vaccine Acronyms & Abbreviations
 - <https://www.cdc.gov/vaccines/terms/vacc-abbrev.html>
 - Translating Foreign Immunization Records
 - U.S. Vaccine Abbreviations
 - Glossary



VACCINE PREVENTABLE DISEASES

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VACCINE PREVENTABLE DISEASE (VPD)

- An infectious disease that is prevented by a vaccine.



DIPHThERIA



- An acute disease caused by a bacteria
- **Symptoms:** sore throat, fever, anorexia, bluish-white covering tonsils/tongue, swollen glands
- **Transmission:** person to person through respiratory droplets from coughing or sneezing
Also from objects, like toys that have the bacteria on them
- **Complications:** blocked airway, damage to the heart muscle, nerve damage, paralysis, lung infection
 - Even with treatment, 1 out of 10 patients die

HAEMOPHILUS INFLUENZAE TYPE B (HIB)

- Cause of severe bacterial infections
 - Leading cause of bacterial meningitis among children younger than 5 years of age, before effective vaccines
- **Symptoms:** fever, stiff neck, skin infection
- **Transmission:** person to person, direct contact or respiratory droplets
 - Usually spreads from individuals who are NOT symptomatic
- **Complications:** meningitis, brain damage, hearing loss, loss of limbs, death



HEPATITIS A

- An acute infection caused by a virus
 - Abrupt onset with illness lasting up to 2 months
- **Symptoms:** sometimes none. Fever, nausea, stomach discomfort, jaundice (yellowing of the skin)
- **Transmission:** fecal-oral
- **Complications:** disease may have late recognition
 - No treatment.



HEPATITIS B

- Infection can be acute or chronic
- Caused by a virus
- **Symptoms:** anorexia, nausea, vomiting, fever, headache, jaundice, joint pain
 - Most young children will NOT have symptoms
- **Transmission:** person to person transmission of infected body fluids
- **Complications:** serious liver conditions, liver cancer
 - ~1,800 people die each year from related liver disease



INFLUENZA



- Highly infectious illness caused by a virus
 - Types A, B & C
- **Symptoms:** fever, sore throat, headache, cough, body aches, vomiting, diarrhea
- **Transmission:** respiratory droplet or surface transmission
 - Infectious prior to presence of symptoms
- **Complications:** sinus and ear infections, pneumonia, inflammation of the heart, brain or muscle tissues, sepsis
 - Children are at high risk for serious complications

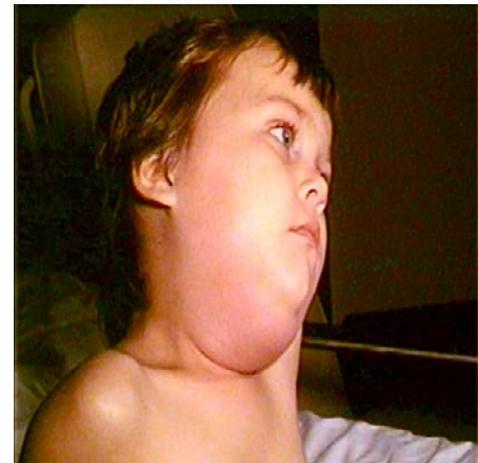
MEASLES

- An acute viral infection
 - Highly contagious
- **Symptoms:** fever, cough, runny nose, rash, red, watery eyes
- **Transmission:** person to person; breathing infected airspace or touching infected surfaces
 - Can live up to 2 hours in an airspace where infected person coughed or sneezed
 - 90% of people close to an infected person will also become infected
- **Complications:** hearing loss, pneumonia, encephalitis
 - 1 out of 1000 will die



MUMPS

- Acute illness caused by a virus
- **Symptoms:** tiredness, fever, headache, anorexia, parotitis (inflammation of the salivary gland(s))
- **Transmission:** saliva or mucus, sharing objects, coughing, sneezing, talking
- **Complications:** encephalitis, meningitis, mastitis, deafness



PERTUSSIS

- Acute infection caused by a bacteria
 - Highly contagious
- **Symptoms:** runny nose, sneezing, fever, progressively worsening cough
 - Coughing may last up to 10 weeks
- **Transmission:** person to person from inhalation of bacterium
 - Most infectious in first two weeks when symptoms of infection are not clear
- **Complications:** Pneumonia, convulsions, apnea, disease of the brain



https://www.youtube.com/watch?v=S3oZrMGDMMw&feature=em-share_video_user

PNEUMOCOCCAL

- Acute infection caused by a bacteria
 - Major cause of pneumonia and meningitis
- **Symptoms:** Fever, chills, chest pain, cough, shortness of breath
- **Transmission:** direct contact with respiratory secretions like mucus and saliva
- **Complications:** Meningitis, pneumonia, sinus and ear infections, brain damage, hearing loss
 - Children younger than 2 years old and those in group child care are at increased risk



Only a plane ride away



POLIO

- Disease caused by a virus
- Last case of wild-type poliovirus in U.S. : 1979
- Still present in Afghanistan & Pakistan
- **Symptoms:** 72% no symptoms, loss of reflexes, severe muscle aches/spasms, paralysis
- **Transmission:** fecal-oral, oral-oral possible
- **Complications:** permanent paralysis



ROTAVIRUS



- Contagious virus
 - Most common cause of severe diarrhea in infants & children
 - Nearly all children infected by age 5 years
 - First infection usually doesn't lead to permanent immunity
- **Symptoms:** Fever, watery diarrhea, vomiting, dehydration
- **Transmission:** fecal-oral through contaminated objects, food, hands, etc.
- **Complications:** There is no treatment, severe dehydration, death

RUBELLA

- AKA: German Measles
- Prevention of congenital rubella syndrome is main objective of vaccination
- **Symptoms:** fever, rash, swollen lymph nodes
 - About 25 to 50% don't have symptoms
- **Transmission:** cough and sneezing, parent to child transmission
- **Complications:** Fetal death, prematurity, deafness, eye defects, mental retardation, liver & spleen damage



TETANUS (LOCKJAW)

- Infection caused by a bacteria
 - Acute, often fatal
- **Symptoms:** Lockjaw, stiff neck, difficulty swallowing, unopposed muscle contraction/spasm
- **Transmission:** bacteria enters through wounds, burns, crush injuries
- **Complications:** bone fractures, pulmonary embolism, pneumonia, breathing difficulty, death
 - 10-20% of cases are fatal



VARICELLA

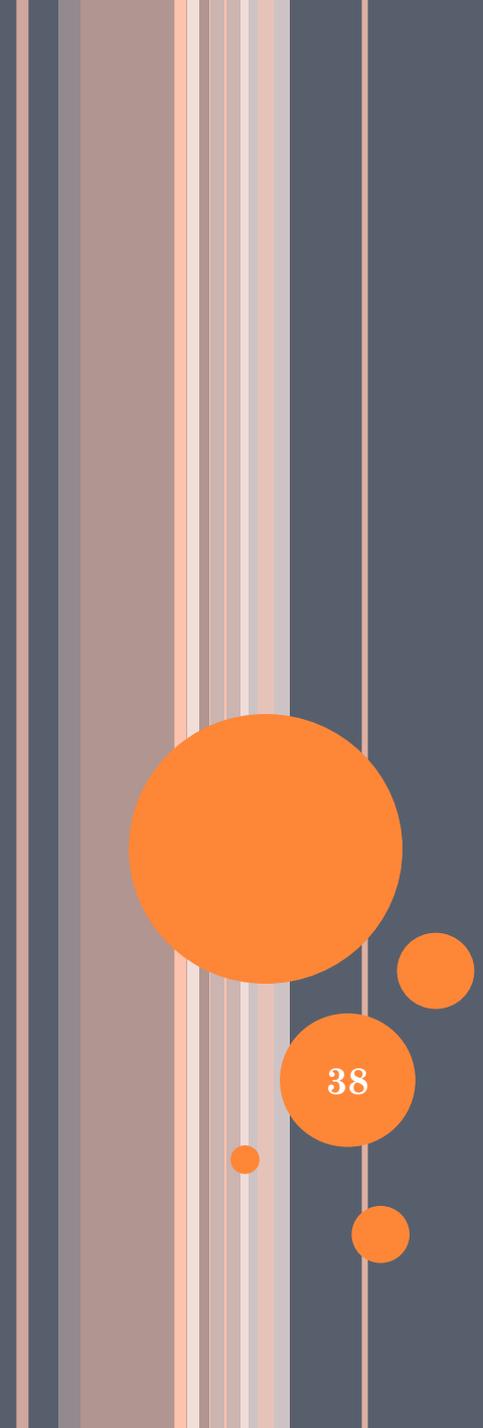
- Acute disease caused by varicella zoster virus
 - Primary infection- chickenpox
 - Recurrent disease- herpes zoster (shingles)
- **Symptoms:** rash-typically beginning on head, fever, loss of appetite
- **Transmission:** touching, breathing, talking
- **Complications:** bacterial infections, pneumonia, brain swelling, sepsis, death
 - Infants are at high risk for complications



VPD'S IN THE NEWS!



- 8/3/16 “Airline, food service workers latest victims of Hawaii Hep A outbreak”
 - Nearly 100 infected so far
- 7/28/16 “County urges meningococcal disease vaccination”
 - 19 cases in Orange and Los Angeles County, CA
- 7/18/16 “Officials work to contain whooping cough outbreak”
 - Southeastern Minnesota, 127 cases-highest in four years
- 7/13/16 “Arizona Measles Outbreak Worsens...”
 - 22 confirmed cases
- 4/6/15 “Disneyland measles outbreak linked to low vaccine rate”
 - 173 people from 17 states infected



THE IMPORTANCE OF VACCINES

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THE IMPORTANCE OF VACCINES

- One of the most successful & cost effective public health measures
- Disease prevention is key
- Help the immune system do its work
- An easier and less risky way to become immune

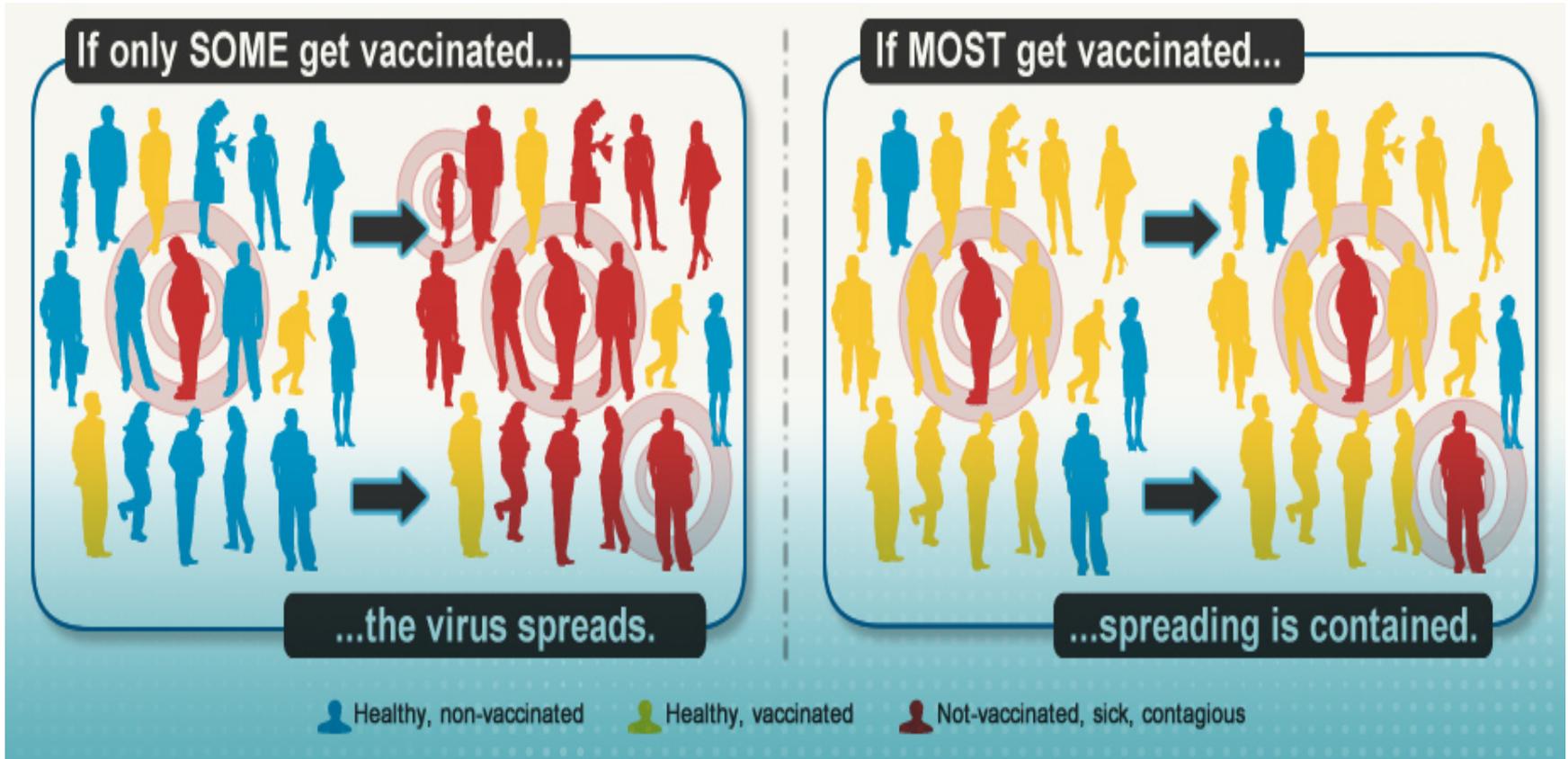


COMMUNITY IMMUNITY

- AKA: Herd Immunity
 - A significant portion of a community is immunized
 - Members who can't be vaccinated will have some measure of protection



IT TAKES A VILLAGE



COMMON SIDE EFFECTS TO VACCINES

- Redness, pain, swelling at site of shot
- Fever, headache
- Fussiness, tiredness
- Rash
- Poor appetite
- Diarrhea, vomiting



MORE SERIOUS SIDE EFFECTS

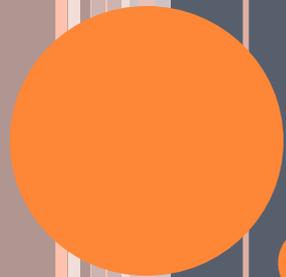
- High fever (105 F or higher)
- Seizure
- Non-stop crying
- Limb swelling



VACCINE HESITANT PARENTS

- Haven't seen VPD
- Lack of trust
- Too many shots, too soon
- Misinformation





RESOURCES & TOOLS



RESOURCES FOR STAFF

- Immunization Unit website
 - www.immunizewyoming.com
- Jab N' Gab Newsletter
- Immunization Unit Staff
 - Jude Alden, Unit Manager
 - 307-777-6001, jude.alden@wyo.gov
 - Val Knepp, Clinical & AFIX Specialist
 - 307-777-8981, val.knepp@wyo.gov

RESOURCES FOR PARENTS

- Patients, Parents, and Guardians
 - www.ImmunizeWyoming.com
- Infant and Child Immunization Resources
 - <http://www.cdc.gov/vaccines/parents/resources/childhood.html>

USEFUL BOOKS

- Managing Infectious Diseases in Child Care and Schools-3rd Edition
 - American Academy of Pediatrics
- Infection Control in the Child Care Center and Preschool – 8th Edition
 - Leigh B. Grossman

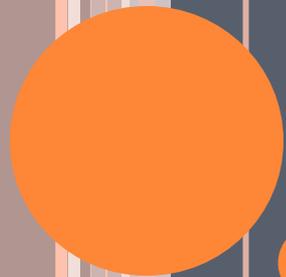
THINKING OUTSIDE THE BOX

- Staff Immunization Policy
- Vaccination Clinics
- Parent Educational Sessions
- Setting Your Own Requirements

WHAT'S NEXT?

- In Person and Online Training Sessions
 - Infection Control in the Child Care Center and Preschool
- Wyoming Immunization Registry (WyIR)
 - Patient Portal, or
 - Access for Child Caring Facilities
- Annual Report





QUESTIONS?

