

January 2020

Dear Early Care and Education (ECE) Professionals,

Thank you for choosing the ECELS Immunization Self-Learning Module. This module explains the value of immunization to support children's health. You will learn why individual vaccines are necessary and the reasons that children should receive all recommended vaccines. The module provides resources to share with staff and families.

Learning Objectives

Upon successful completion of this module, the learner will be able to:

- Describe the purpose of currently recommended vaccines
- Identify resources for accurate information on vaccines and current vaccine schedules
- Evaluate vaccine records for compliance with current recommendations



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Instructions to Claim Credit

To complete this module:

- View the online videos and use the resources described in the module.
- Complete the Assessment–Quiz.
Each person requesting credit must independently complete the Assessment-Quiz.
- Submit the responses in one of the following ways to verify completion of the module requirements:
 1. [Online ECELS Immunization Survey Monkey Assessment – Quiz](#): (preferred method) OR
 2. Send via surface mail, fax or scan your responses to the Immunization Assessment – Quiz (including the Immunization Record Review Form) to ECELS at the contact information above.
- Follow instructions on the ECELS website: www.ecels-healthychildcarepa.org to pay for review of the module. Select the “Professional Development/Training” tab, then Self-Learning Modules.” Review the information in the box: “Important Reminders.” Click on the green rectangle: “Click Here to Order SLM Reviews” to pay the review fee. Submit the Module Review Payment Form (if paying for more than one staff member that completed the module).

ECELS staff will review your work and offer technical assistance to complete the module. For questions, call ECELS 484-446-3003 / toll free in PA 800-243-2357 or email ecels@paaap.org. ECELS will approve two (2) hours of professional development credit for each person who successfully completes the module. Processing takes approximately 2-4 weeks after you submit the required documentation and pay the review fee. Access confirmation of your credit at the PA Keys website: www.papdregistry.org / login / My PD.

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Understanding Immunizations

1. Go to the website of the Vaccine Education Center (VEC) of The Children's Hospital of Philadelphia (CHOP) at <http://www.vaccine.chop.edu>. Review the information about vaccines.
 - View the video series “[Vaccines: Separating Facts from Fear](#)”.
 - Click “[A Look at Each Vaccine](#)” and read about the vaccines on the vaccine schedule for children. For example, [children 0-6 years](#), would be given vaccines for the following: [Chickenpox](#), [Diphtheria, Tetanus and Pertussis](#), [Haemophilus influenzae type b \(Hib\)](#), [Hepatitis A](#), [Hepatitis B](#), [Influenza \(Flu\)](#), [Measles, Mumps and Rubella](#), [Polio](#), [Pneumococcal](#), [Rotavirus](#).

2. Go to www.cdc.gov/vaccines, the [National Immunization Program of the Centers for Disease Control and Prevention](#) website. Many of the materials are available in Spanish. The information sheets about individual vaccines are available in many languages. [For Parents: Vaccines for Your Children](#) and [Diseases & the Vaccines that Prevent Them](#) offers vaccine information similar to CHOP's VEC website. Review the [schedules](#) (parent-version-easier to read) for the age of the children in your program: [0-6 years](#) or [7-18 years](#) and for the [adults](#) who work in your program. Bookmark this website as a favorite to use whenever you have a question about vaccines or whether a child or staff member is up-to-date with the currently recommended schedule. If you don't use a vaccine assessment tool (described in the following paragraphs) to evaluate a child's/staff's immunization record, you will need to compare the list of vaccines the child/staff should have received and the age when these should have been given with what their record shows the child/staff received.
3. Evaluate 3 Child Health Assessment forms/vaccine records.
To evaluate the immunization status, you can either use the ECELS tool called WellCareTracker™ or the vaccine checking tools and schedules on the CDC website to check the records of 3 children.

Option One: WellCareTracker™ is a secure, online software program that provides individual report and program reports for preventive care services and currently recommended vaccines. You must be a subscriber to use this tool, but you can access an online demonstration of the tool by following instructions at website. You can see firsthand how easy and useful this tool is. Programs can subscribe at www.wellcaretracker.org. The cost for WellCareTracker™ is a one time, \$25.00 set up fee and \$1.50/per enrolled child, per year. For example, a program with 50 enrolled children would pay \$100.00 for the first year. WellCareTracker™ is easier than doing the comparison using the CDC website-generated vaccination schedule. WellCareTracker™ checks for other preventive health care services in addition to vaccines. WellCareTracker™ produces reports in compliance with PA Department of Human Services (DHS) regulations 55 PA Code 3270.131, 3280.131 and 3290.131 for all the enrolled children, saving time for staff when this report is due. Once you subscribe or if you are already using WellCareTracker™, run a report for 3 children. Review the report results. Cover the child's name and birthdate, scan the three reports as one PDF and upload for question #14 in Survey Monkey.

Option Two: Instead of using WellCareTracker™, use the [Childhood Vaccine Assessment Tool](#) – Birth through 18 years of age. Input an enrolled child's birth date, responses to the health questions and view the recommended vaccinations. Review the recommendations, compare them to the child's record and complete the Immunization Record Review Form and upload for question #14 in Survey Monkey.

Use one of these options to check the immunization records for 3 children in your program. If you notice a child may be missing vaccines, have the parents contact their child's health care provider to either get the dates when vaccines were given that are missing from your records, or plan to get any needed catch-up doses of vaccine. Sometimes, children who start getting vaccines late need fewer doses to be protected. These details are on the [CDC website](#), but you may need to have the child's health provider explain when late immunization with fewer doses is enough.

4. Plan with staff members at your facility how to share vaccine information with families in your program. In the Assessment-Quiz you will return to ECELS, you will describe your plans.

Flu Vaccine

The influenza (flu) virus is common and unpredictable. It can cause serious complications – even in healthy children. The Centers for Disease Control and Prevention (CDC) reports 136 influenza-related pediatric deaths for 2018-2019. The 2018–2019 influenza season was the longest-lasting season reported in the United States in the past ten years. Certain people are more at risk for serious flu-related complications. These include:

- Children younger than 5 years of age, especially those younger than 2 years
- Preterm infants
- Children of any age with certain long-term health problems, for example, asthma or other lung disorders, heart disease, or a neurologic or neurodevelopmental disorder
- Pregnant women
- Older adults age 65 years and older: Immune systems decline as adults age.

Young children are at risk for infections because of:

- Young immune systems
- First time exposure to germs
- Sharing and
- Caregivers and young children **don't** always:
 - Wash hands after touching nose, eyes, mouth; before eating, playing and touching
 - Cover their cough
 - Get vaccinated (might be too young)
 - Stay home when ill

The influenza vaccine is on the recommended Advisory Committee on Immunization Practices (ACIP) schedule and is **mandatory for children 6 months of age and older in child care**. DHS permits written exemptions from immunization for religious belief or strong personal objection equated to a religious belief or medical exemption.

Exemptions / Refusal to Vaccinate

Children enrolled in a before or after-school program at a licensed child care facility are required by the PA Department of Human Services / Office of Child Development and Early Learning (DHS/OCDEL) to follow the Advisory Committee on Immunization Practices (ACIP) schedule. Child care programs must have documentation on file for each child that recommended vaccines were given. DHS permits written exemptions from immunization for religious belief or strong personal objection equated to a religious belief or medical exemption. If vaccines cannot be given due to severe allergic reaction or other medical exemption, the child must have a written, signed and dated statement from the child's physician, physician's assistant or certified registered nurse practitioner on file at the child care program. If a child's appointment for the missing vaccine is scheduled, have documentation of the date in the child's file at the child care program. See DHS Certification Regulations [3270.131](#), [3280.131](#), [3290.131](#) Health information.

[Model Child Care Health Policies](#), 5th Edition (MCCHP5) has sample policy language to address enrollment of unimmunized or under-immunized children. See MCCHP5 [Appendix E Refusal to Vaccinate](#); consider using this form if you have enrolled children who are unimmunized or under-immunized.

ECE programs are prone to disease outbreaks. Unvaccinated children are at increased risk for disease and they can spread disease to others. They can spread disease to babies who are too young to be fully vaccinated. People who might not be able to receive certain vaccines due to health conditions can be infected.

Review *Caring for Our Children Standards Online Database** [Standard 7.2.0.2: Unimmunized Children](#) for best practice information that addresses immunizations that have not been or are not to be administered because of a medical condition or because of the parents/guardians' religious or philosophical beliefs. Exclusion of an unimmunized (susceptible) or under-immunized child from the child care facility in the event of a risk of exposure to a vaccine-preventable illness outbreak is also covered. The director, program leadership, and legal counsel should decide if they accept children who are unimmunized or under-immunized. If the program accepts children who are unimmunized or under-immunized, the unimmunized or under-immunized children will be excluded during outbreaks of vaccine-preventable illness as directed by the state or local health department.

What to Do If There Is an Outbreak

An example of what may occur when children are not vaccinated is the measles outbreak in the US. From January 1 to December 5, 2019, 1,276 [individual cases of measles](#) have been confirmed in 31 states. This is the greatest number of cases reported in the U.S. since 1992. Measles is more likely to spread and cause outbreaks in US communities where groups of people are unvaccinated. Most cases are among people who were **not** vaccinated against measles.

Measles can cause serious complications. The [Centers for Disease Control and Prevention](#) (CDC) reports:

- 1 out of 4 people who get measles will be hospitalized
- 1 out of every 1,000 people with measles will develop brain swelling due to infection (encephalitis), which may lead to brain damage
- 1 or 2 out of 1,000 people with measles will die, even with the best care

The CDC urges ECE staff to help parents understand that the MMR (measles-mumps-rubella) vaccine is the best protection against measles infection. **Check all health records to be sure children and staff in your program are up to date on MMR vaccine.** Children need two doses of MMR: one dose at 12–15 months old and another dose at 4–6 years old. These are the recommended ages. Children can get the second dose at any age, if it is at least 28 days after the first dose. Adults who do not have [evidence of immunity](#), e.g., written documentation of adequate immunization, born before 1957, etc. should consult their healthcare provider about getting a dose of MMR vaccine. Children and staff members who do not have documentation that they are up-to-date should be referred to their health care provider.

If a child contracts a reportable disease or there is an outbreak, directors need to know who is unimmunized or under-immunized. Programs need to have a system in place to identify those who are not fully immunized. *Caring for Our Children Standards Online Database** [Standard 3.6.1.4: Infectious Disease Outbreak Control](#) describes the increased risk to the susceptible individual and rationale for their exclusion. Depending on the disease, different actions may be required. For emergency health questions or reports of an outbreak, call the PA Department of Health at 877-PA-HEALTH (877-724-3258).

Consider posting and sharing information from the CDC's Educational Resources for Parents and Child Care Providers (also available in Spanish) and other reputable websites for staff and parent education:

- American Academy of Pediatrics - [Healthy Children](#)
 - [Breastfeeding Baby's 1st Immunization](#)
 - [How to Protect Your Children During a Measles Outbreak](#)
 - [An Important Immunization Message from the AAP](#)
 - [Protecting Your Baby from a Measles Outbreak](#)
 - [How Do Vaccines Work](#)
 - [14 Diseases You Almost Forgot About Thanks to Vaccines](#)
- [Children's Hospital of Philadelphia Vaccine Education Center](#)
- [Vaccinate Your Family](#) .

Immunizations for ECE Staff

[What Vaccines are Recommended for Adults](#)

Immunizations are not just for children. Getting vaccinated is an important part of staying healthy. Immunizations help prevent staff from getting and spreading serious diseases that could result in poor health, missed work, medical bills, and them not being able to care for their family.

Staff may also be at risk for vaccine-preventable disease due to their age, job, lifestyle, travel, or health conditions. Staff should talk to their healthcare professional about which vaccines are right for them.

[Adults May Be at Risk for Serious Disease](#) - every year thousands of adults in the U.S. become seriously ill and are hospitalized because of diseases that vaccines can help prevent. Many adults even die from these diseases. By getting vaccinated, adults can help protect themselves from much of this unnecessary suffering. Find out what vaccines adults may need based on different risk factors.

[Vaccinations for Adults](#) All adults need:

- Influenza (flu) vaccine every year
Educators and staff can help reduce the spread of respiratory illnesses like flu and colds. Adult flu vaccination protects vulnerable young children. Infants less than 6 months of age are too young to get the flu vaccine. It is especially important for everyone who comes in contact with infants to get flu vaccine. This will help protect babies from exposure to the virus.

Many people say they have had the flu when they had an uncomfortable respiratory illness. However, short, mild-to-moderate illnesses are most often caused by other seasonal viruses. Usually, influenza causes a severe and long-lasting illness.

- Tetanus (Td) or Tetanus, Diphtheria, Pertussis (Tdap) vaccine
- Other vaccines routinely recommended for adults include varicella (chicken pox), measles, mumps and rubella.

Resources

American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education. *CFOC Standards Online Database*. Aurora, CO; National Resource Center for Health and Safety in Child Care and Early Education; 2019.

Caring for Our Children (CFOC) is a collection of national standards that represent the best evidence, expertise, and experience in the country on quality health and safety practices and policies that should be followed in today's ECE settings.

Aronson, S. S., MD, FAAP, Shope, T.R. MD, MPH, FAAP (2020). *Managing Infectious Diseases in Child Care and Schools, A Quick Reference Guide* 5th Edition. Itasca, IL: American Academy of Pediatrics.

This award-winning guide provides child care directors, teachers, and caregivers with essential information on the prevention and management of infectious diseases in group care settings.

The newly revised and updated fifth edition is aligned with the most recent version of the premier AAP source of information on infectious diseases, *Red Book®: 2018–2021 Report of the Committee on Infectious Diseases*, 31st Edition. The robust section of more than 55 quick reference fact sheets on common infectious diseases and symptoms has been expanded to include a new sheet on croup.

Additionally, the forms have been updated to align with *Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs*, 4th Edition, and there is a new form, "Infections Caused by Interactions of Humans With Pets and Wild Animals." As always, the guide is easy to use, providing clear, authoritative guidance on limiting the spread of infection.

Aronson, S. S., MD, FAAP. (2014). *Model Child Care Health Policies* 5th edition. Itasca, IL: American Academy of Pediatrics.

Significantly revised and updated, the new [Model Child Care Health Policies](#), 5th Edition is a must-have tool to foster adoption and implementation of best practices for health and safety in group care settings for young children. These model policies are intended to ease the burden of writing site-specific health and safety policies from scratch.

Child care programs of any type (public, private, Head Start, and tuition-funded facilities) can use Model Child Care Health Policies by selecting relevant issues for their operation and modifying the wording to make selected policies appropriate to the specific settings. Available online [free](#) at the Early Childhood Education Linkage System's (ECELS) [website](#) or for purchase at <https://shop.aap.org/>.

Immunization Assessment – Quiz Questions

Name _____ Email _____ Phone # _____

ECE Program Name _____ Director's Name _____

ECE Program Phone # _____ Director's Email _____

This ECELS Immunization Survey Monkey Assessment – Quiz may be completed [online](#) (preferred method) or surface mail, fax or email your responses to the questions below.

Directions: Circle the one best answer for each question where choices are offered. Fill in the answers to the other questions. Attach additional pages if you need more room for answering the open-ended questions.

1. The recommended schedule of immunizations has been researched and documented to be the most effective and safe way to protect children.
 - a. True
 - b. False
2. Children in Early Care and Education (ECE) programs are more likely to get vaccine-preventable diseases than those who receive care only in their own homes.
 - a. True
 - b. False
3. Studies on various vaccines show that:
 - a. MMR vaccine causes autism
 - b. Hepatitis B vaccine causes multiple sclerosis
 - c. Most side effects of vaccines are mild
 - d. Hepatitis B vaccine causes SIDS
 - e. a. and d
4. 1 or 2 out of 5,000 people with measles will die, even with the best care.
 - a. True
 - b. False
5. Reasons vaccines are necessary is discussed in the video "[Vaccines: Separating Fact from Fear](#)". Reasons include:
 - a. A choice not to get a vaccine, is a choice to get the disease.
 - b. Some diseases "smolder" or persist below the surface. For example, measles or mumps - if we lower immunization rates, we run the risk that there will be outbreaks of those diseases.
 - c. Diseases like polio or diphtheria, which have been either completely or virtually eliminated from the U.S., have not been eliminated from the rest of the world.
 - d. All of the above
6. It is better to allow children to catch childhood illnesses than to be vaccinated since immunity from vaccines is not as strong as immunity from natural infection.
 - a. True
 - b. False
7. Each January, an updated immunization schedule is published jointly by the Advisory Committee on Immunization Practices (ACIP), the American Academy of Pediatrics (AAP) and the American Academy of Family Physicians (AAFP). Copies of the new schedule are available from:
 - a. www.aap.org
 - b. www.cdc.gov/vaccines
 - c. either of these websites

8. If immunizations cannot be given due to severe allergic reaction or other medical exemption, a written, signed and dated statement from the child's health care provider must be on file at the ECE program
 - a. True
 - b. False

9. Describe how your facility handles the following tasks:
 - a. How does your facility check the vaccine records of enrolled children to be sure every child is up-to-date at enrollment?

 - b. How does your facility check vaccine records throughout the period that the child remains in the program to be sure the child remains up-to-date as required by the regulations of the Pennsylvania Department of Human Services and the PA Department of Health?

 - c. How do you track when a child becomes due for a vaccine?

10. What is your facility's policy about:
 - a. Sixty (60) days allowed by the state after enrollment to get children up-to-date with preventive care?

 - b. Children who want to enroll at your program but have not had the nationally recommended vaccines and screening services according to the ACIP/AAP/AAFP schedule?

11. What does your facility do about children who do not get vaccines for which they become due while they are enrolled?

12. What are two (2) items of information you and your program will share from content found on the websites of the Vaccine Education Center of The Children's Hospital of Philadelphia and the National Immunization Program of the Centers for Disease Control and Prevention? How will you share this information?
 1. _____

 2. _____

13. List at least two examples that describe what your facility will do differently to check vaccines as a result of completing this Immunization Self-Learning Module.
 1. _____

 2. _____

