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SB 189: AN ACT CONCERNING NOTICE TO THE DEPARTMENTS OF PUBLIC HEALTH AND EDUCATION REGARDING THE IMMUNIZATION OF SCHOOL CHILDREN.

Members of the Public Health Committee

HB 189 states “if a child has not received a vaccine required by such schedule for active immunization, is not exempt from such requirement and is permitted to enroll in any such program, the public or nonpublic school in which the child is enrolled shall notify the Departments of Education and Public Health”.

The stated purpose of HB 189 is to require schools to report to the Departments of Education and Public Health concerning children enrolled in schools that have not had the required immunizations.

Background

Since the inception of the concept of nurses in the public schools in the late 1890’s disease prevention has been a goal of school and public health nursing.

<http://www.workingnurse.com/articles/lillian-wald-founded-public-health-nursing>
<http://www.nwhm.org/education-resources/biography/biographies/lillian-wald/>

One aspect of disease prevention is the immunization of children against diseases that can be life threatening and/or debilitating. In the United States we are fortunate to have successfully eliminated the danger of exposure to a variety of diseases such as diphtheria, polio, measles, mumps, tetanus through wide spread vaccination of our children.

Recent sensational but not necessarily correct information available on the internet, and in the media, has led to an increasing number of cases of vaccine preventable diseases worldwide because parents are opting out of having their children immunized.

The increase in the number of homeless, transient, or uninsured families with young children has also contributed to the decline in the immunization of children.

The Connecticut General Assembly legislates mandatory vaccines when a child enrolls in a public school.

Sec. 10-204a. Required immunizations. (a) Each local or regional board of education, or similar body governing a nonpublic school or schools, shall require each child to be protected by adequate immunization against diphtheria, pertussis, tetanus, poliomyelitis, measles, mumps, rubella, hemophilus influenzae type B and any other vaccine required by the schedule for active immunization adopted pursuant to section 19a-7f before being permitted to enroll in any program operated by a public or nonpublic school under its jurisdiction.

(b) The definitions of adequate immunization shall reflect the schedule for active immunization adopted pursuant to section 19a-7f and be established by regulation adopted in accordance with the provisions of chapter 54 by the Commissioner of Public Health, who shall also be responsible for providing procedures under which said boards and said similar governing bodies shall collect and report immunization data on each child to the Department of Public Health for compilation and analysis by said department.

School nurses are the primary gate keepers ensuring that all children entering school have up-to-date immunizations. We work with the family, school, physicians and local health departments to ensure all students are adequately immunized, prior to entry into school, or to develop a plan with the family and physician to bring the student up-to-date if there are multiple vaccines that must be spaced out over time.

School nurses comply with section (b) ... shall collect and report immunization data on each child to the Department of Public Health for compilation and analysis by said department. School nurses complete an annual Immunization Survey generated by DPH. The data collected is not student specific. It looks at a cohort of students and the number of students in that cohort who are compliant (immunized or exempt) with the required immunizations. The final report then looks at the compliance rate for each district.

Conclusion

I would like to support the notification of the State Departments of Education and Public Health of students who enter school without the mandated immunizations.

I question the intent of the notification of the SDE and DPH. Additional paperwork without the programs or plans in place to resolve the identified problem (non-compliance) and the myriad reasons behind the non-compliance is not an effective use of the school nurse's time. To put the sole burden on the school nurse to ensure compliance is unrealistic. There are multiple disciplines that must work together to ensure that all children are receiving the health care many take for granted.

With all due respect to the legislators, I believe the following questions should be addressed in this legislation so that HB 189 results in improving the health of all children enrolled in public schools.

- Will there be further directives, regulations, and guidelines to those departments that will result in better compliance with the mandated immunizations?
- Will the data be student specific so SDE and/or DPH can follow-up with the family to ensure their compliance with the statute?
- Will SDE and/or DPH provide education or services to the physicians who are designated as the medical home, to prompt the necessary follow-up with the family?
- Will all physician practices be required to use an electronic immunization database that can be monitored by the SDE and/or DPH to ensure timely administration of the schedule of immunizations or otherwise flag the physician's office that a child is due or past due for the next immunization?
- Will school nurses be able to access such a database to check a child's immunization record when the parent presents at school without a complete immunization record and has a history of multiple health care providers over time?

- What would be the consequences to a family, child, or health care provider that consistently over time, does not comply with the statutes and regulations regarding up-to-date immunizations for all children.