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**SB 840 AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S
RECOMMENDATIONS REGARDING IMMUNIZATION RATES.**

Co-Chairs of Public Health, Senator Gerratana, Representative Steinberg, Representative Somers,

Thank you for the opportunity to testify in opposition to SB 840. As a school nurse with 32 years of experience in school health and a member of the Association of School Nurses of Connecticut, this bill is opposed specifically as it applies to annual immunization rates for each child in public and private schools in the state.

School Nurses in public and private schools already provide data annually on immunization rates to the Department of Public Health by completing the Statewide School Immunization Survey.

“Each year the Department of Public Health distributes an immunization survey to all Connecticut schools and licensed group day care homes and child care centers. On the survey, the total number of attendees who completed the required vaccine series, the number who failed to complete the required vaccine series, and the number of children with a religious or medical exemption are reported. This information is reported for all child care attendees on the child care survey and for all kindergarten and seventh grade students on the school survey. In addition, influenza vaccine receipt is surveyed for all preschool² attendees. Individual vaccine information on each child is not collected; only total numbers are collected from each school and child care facility.”

(Downloaded from <http://www.ct.gov/dph/cwp/view.asp?a=3136&Q=556186&dphNav=%7C>)

A mechanism for vaccine date already exists, easily calculated, and more accurate:

- Vaccine data collection is already available from the **Immunization Registry**. Requiring the provider to submit information to the registry at the time of every vaccine administration would result in accurate records for each child.

The reporting of data in the manner indicated in SB 840 will be difficult to retrieve, skewed and inaccurate. Staffing for school nurses, typically the source of vaccine data in Connecticut, varies from district to district. Individual analysis of each child is not achievable because technology for data analysis is not available to all districts. There is no easy way to extrapolate vaccine information on thousands of individual children.

The Immunization Registry is the means to achieve the end you seek. I urge you to oppose this bill and consider an alternate means of securing data on vaccination rates in Connecticut.

Respectfully,

Donna Kosiorowski RN