

SCHOOL IMMUNIZATION REQUIREMENTS

Background Information – Schools have historically entered student immunization records into their school information system (SIS) and then compiled a report for ISDH regarding the immunization status of students in grades K, 1 and 6. This report to ISDH required a count of the number of students missing a particular vaccine and only in grades K, 1 and 6 as these are the grade levels that ISDH is required to send to the CDC. This report was not time-consuming and could be done by the school nurse in less than 15 minutes. Beginning in 2009, ISDH no longer accepted this report from schools and instead requested that school nurses enter each student immunization record into CHIRP (the state immunization data system) so that ISDH could pull their immunization report from CHIRP.

School nurses are required to do the majority of the work regarding ensuring that Indiana students meet the minimum immunization requirements set by ISDH. First, school nurses must check every immunization record for each student. Sometimes there are multiple records - from multiple providers, records can be handwritten and difficult to read, and they can be in foreign languages. Next, the nurse determines if the student has the correct number of immunizations and must also determine if these immunizations were given at the correct time (look at the child's birthdate, the interval between each vaccine and ensure live vaccines were given appropriately). If anything is incorrect, unreadable, or missing, the nurse must contact the parent, explain what is missing or needs to be corrected and encourage the parent to have this addressed by the student's health care provider as soon as possible. The nurse now has to enter the immunization record into his/her student SIS. Once the nurse completes this task, he/she runs a report to see what students still have incomplete records and makes a second contact with parents. This is a time-consuming process, but it is done extremely well throughout our state. The data we have at IDOE regarding the immunization status of our students based on the 2014-2015 school year is: 95.6% of students are completely vaccinated, 2.7% are in the process of being vaccinated, 1.2% have a religious objection, 0.3% have a medical exemption, and all of these immunization records have been entered into the school SIS as immunization records are a required component of the student's electronic transcript.

Result – School nurses have been asked to enter the immunization record for their students, not once, but twice – once into their SIS (per IC 20-33-2-12) and once into CHIRP (per IC 20-34-4-6). This data entry process takes between 10-15 minutes per student (depending on the complexity of the entry) for a nurse to enter an immunization record into either of these systems. (For example, a school with 700 students, this task would take approximately 1.16 hours or 15 full school days of data entry to input all of the student immunization records into the SIS and another 15 full school days of data entry to input all of the student immunization records into CHIRP.) Schools accept the responsibility and have historically entered student immunization records into the SIS and will continue to do so as this is the only “complete” database of school immunization records, it is a vital tool used by the school and ISDH during an outbreak situation, and it is a mandatory part of the school transcript. However, not all schools have had the extra time or the resources to enter the immunization information into CHIRP.

Dilemma - This is not a public health issue and it is not an issue of our students being allowed to attend school without proper proof of immunization status – it is about school nurses having to double enter an immunization record for each student. In order to enter this data into the CHIRP database, school nurses would need to work extra, unpaid hours of overtime or take time away from giving care for students during the school day.

Additional Notes:

- IDOE data shows that for the 2014-2015 school year – 95.6% of students met the requirement for vaccination, 2.7% were in process of being vaccinated, 1.2% had a religious objection, 0.3% had a medical exemption, and all of these records had been entered into the school data information system
- Schools cannot enter immunization records into CHIRP if they do not have parent written permission per FERPA
- CHIRP is cumbersome for school nurses to use as it times out, it does not roll up to the next school, school data is deleted if a provider enters the same data, and training for school nurses regarding CHIRP is difficult to accomplish
- As of July 1, 2015, any provider that administers a vaccine is required to enter the vaccine into CHIRP
- Attempts have been made to share data between CHIRP and school SIS's, but this was discontinued as of December 2015 due to errors and incompatibility
- A Proposed Plan could include:
 - IDOE could add the information needed by the CDC to the School Health Report and share this information with ISDH
 - Providers (health departments, primary care physicians, advanced practice nurses, and pharmacists) main responsibility would be to populate CHIRP as the state electronic immunization record as one part of a person's EMR (electronic medical record) (Note – CHIRP is a database for all Indiana residents of all ages and includes a complete list of all immunizations administered to a person, it is not a system that contains only students who attend public schools or only immunizations that are required for school attendance)
 - Schools main responsibility would be to populate the e-transcript as the state school record
 - ISDH and IDOE could work together to give guidance to schools to focus on entering immunization records for students in grades K and 6 as these are the reportable grades to CDC
 - For schools that meet the recommended school nurse to student ratio of 1:750 – the school could enter CHIRP records in grades K and 6; for schools that have a ratio of 1:1,500 the local health department could assist the school; for schools that have a ratio of 1:>1,500 ISDH could assist the school
 - Using this plan, all student records would be entered into CHIRP within 5 years and the grade levels that ISDH reports to the CDC of K and 6 would be accomplished within 1 year

IC 20-33-2-12

Nonpublic, nonaccredited, and nonapproved schools; curriculum or content requirements; student enrollment or participation

Sec. 12. (a) A school that is:

- (1) nonpublic;
- (2) nonaccredited; and
- (3) not otherwise approved by the state board;

is not bound by any requirements set forth in IC 20 or IC 21 with regard to curriculum or the content of educational programs offered by the school.

(b) This section may not be construed to prohibit a student who attends a school described in subsection (a) from enrolling in a particular educational program or participating in a particular educational initiative offered by an accredited public, nonpublic, or state board approved nonpublic school if:

- (1) the governing body or superintendent, in the case of the accredited public school; or
- (2) the administrative authority, in the case of the accredited or state board approved nonpublic school;

approves the enrollment or participation by the student.

As added by P.L.1-2005, SEC.17.

IC 20-33-2-13

High school transcripts; required contents

Sec. 13. (a) A school corporation shall record or include the following information in the official high school transcript for a student in high school:

- (1) Attendance records.
- (2) The student's latest ISTEP program test results under IC 20-32-5.
- (3) Any secondary level and postsecondary level certificates of achievement earned by the student.
- (4) Immunization information from the immunization record the student's school keeps under IC 20-34-4-1.
- (5) Any dual credit courses taken that are included in the core transfer library under IC 21-42-5-4.

(b) A school corporation may include information on a student's high school transcript that is in addition to the requirements of subsection (a).

As added by P.L.1-2005, SEC.17. Amended by P.L.140-2008, SEC.8; P.L.43-2014, SEC.7; P.L.222-2015, SEC.15.

IC 20-33-2-14

Compulsory attendance; school corporation policy; exceptions; service as page or honoree of general assembly

Sec. 14. (a) This section and sections 15 through 17.5 of this chapter apply to a student who attends either a public school or a nonpublic school.

(b) The governing body of each school corporation shall have a

IC 20-34-4

Chapter 4. Immunizations

IC 20-34-4-1

Keeping immunization records; student transfer

Sec. 1. (a) Each school shall keep an immunization record of the school's students according to procedures prescribed by the state department of health.

(b) Whenever a student transfers to another school, the school from which the student is transferring may furnish, not later than twenty (20) days after the transfer, a copy of the student's immunization record to the school to which the student is transferring.

(c) Whenever a student enrolls in a state educational institution, the school from which the student graduated may furnish a copy of the student's immunization record to the state educational institution. If the student is enrolled in a state educational institution while still attending a secondary level school, the secondary level school that the student is attending may furnish a copy of the student's immunization record to the state educational institution.

As added by P.L.1-2005, SEC.18. Amended by P.L.2-2007, SEC.231; P.L.208-2015, SEC.11.

IC 20-34-4-2

Required immunizations; immunization calendar; rules

Sec. 2. (a) Every child residing in Indiana who is enrolled in an accredited elementary school or high school shall be immunized as determined by the state department of health against:

- (1) diphtheria;
- (2) pertussis (whooping cough);
- (3) tetanus;
- (4) measles;
- (5) rubella;
- (6) poliomyelitis;
- (7) mumps;
- (8) varicella;
- (9) hepatitis A;
- (10) hepatitis B; and
- (11) meningitis.

(b) The state department of health may expand or otherwise modify the list of communicable diseases that require documentation of immunity as medical information becomes available that would warrant the expansion or modification in the interest of public health.

(c) Before November 30 of each year, the state department of health shall publish a two (2) year calendar of immunization requirements and recommendations. The calendar must include:

- (1) the immunization requirements for the following school year; and

(2) recommendations for immunization requirements for the year subsequent to the following school year.

(d) The publishing time frame for the calendar described in subsection (c) does not apply in the event of an emergency as determined by the state health commissioner.

(e) The state department of health shall adopt rules under IC 4-22-2 specifying the:

- (1) required immunizations;
- (2) child's age for administering each vaccine;
- (3) adequately immunizing doses; and
- (4) method of documentation of proof of immunity.

As added by P.L. 1-2005, SEC. 18. Amended by P.L. 161-2009, SEC. 5; P.L. 208-2015, SEC. 12.

IC 20-34-4-3

Notification; provision of information to parents

Sec. 3. (a) Each school shall notify each parent of a student who enrolls in the school of the requirement that the student must be immunized and that the immunization is required for the student's continued enrollment, attendance, or residence at the school unless:

- (1) the parent or student provides the appropriate documentation of immunity; or
- (2) IC 20-34-3-2 or IC 20-34-3-3 applies.

(b) A school that enrolls grade 6 students shall provide each parent of a student who is entering grade 6 with information prescribed by the state department of health under subsection (c) concerning the link between cancer and the human papillomavirus (HPV) infection and that an immunization against the human papillomavirus (HPV) infection is available.

(c) The state department of health shall provide a school described in subsection (b) with the information concerning cancer and the human papillomavirus (HPV) infection required in subsection (b). The information must include the following:

- (1) The latest scientific information on the immunization against the human papillomavirus (HPV) infection and the immunization's effectiveness against causes of cancer.
- (2) That a pap smear is still critical for the detection of precancerous changes in the cervix to allow for treatment before cervical cancer develops.
- (3) Information concerning the means in which the human papillomavirus (HPV) infection is contracted.
- (4) A statement that any questions or concerns concerning immunizing the child against human papillomavirus (HPV) could be answered by contacting a health care provider.

(d) The state department of health shall provide the department of education with material concerning immunizations and immunization preventable diseases for distribution to parents and guardians. The department of education shall provide these materials to schools to be provided to students' parents and guardians. These materials may be

distributed by a school by posting the required information on the school's Internet web site.

As added by P.L.1-2005, SEC.18. Amended by P.L.80-2007, SEC.1; P.L.208-2015, SEC.13.

IC 20-34-4-4

Presenting student for immunization; entering information into immunization data registry

Sec. 4. (a) The parent of any student who has not received the immunizations required under this chapter shall present the student to a health care provider authorized to administer the immunizations.

(b) The health care provider who administers the required immunizations to a student or the health care provider's designee shall enter the immunization information into the state immunization data registry in accordance with IC 16-38-5.

As added by P.L.1-2005, SEC.18. Amended by P.L.208-2015, SEC.14.

IC 20-34-4-5

Statement of immunization history; waiver; rules

Sec. 5. (a) Each school shall require the parent of a student who has enrolled in the school to furnish, not later than the first day of school attendance, proof of the student's immunization status, either as a written document from the health care provider who administered the immunization or documentation provided from the state immunization data registry.

(b) The statement must show, except for a student to whom IC 20-34-3-2 or IC 20-34-3-3 applies, that the student has been immunized as required under section 2 of this chapter. The statement must include the student's date of birth and the date of each immunization.

(c) A student may not be permitted to attend school beyond the first day of school without furnishing the documentation described in subsections (a) and (b) unless:

- (1) the school gives the parent of the student a waiver; or
- (2) the local health department or a health care provider determines that the student's immunization schedule has been delayed due to extreme circumstances and that the required immunizations will not be completed before the first day of school.

The waiver referred to in subdivision (1) may not be granted for a period that exceeds twenty (20) school days. If subdivision (2) applies, the parent of the student shall furnish the written statement and a schedule, approved by a health care provider who is authorized to administer the immunizations or the local health department, for the completion of the remainder of the immunizations.

(d) The state department of health may commence an action against a school under IC 4-21.5-3-6 or IC 4-21.5-4 for the issuance of an order of compliance for failure to enforce this section.

(e) Neither a religious objection under IC 20-34-3-2 nor an exception for the student's health under IC 20-34-3-3 relieves a parent from the reporting requirements under this section.

(f) The state department of health shall adopt rules under IC 4-22-2 to implement this section.

As added by P.L.1-2005, SEC.18. Amended by P.L.208-2015, SEC.15.

IC 20-34-4-5.5

Repealed

(As added by P.L.80-2007, SEC.2. Repealed by P.L.208-2015, SEC.16.)

IC 20-34-4-6

Collection of immunization data; onsite review or examination

Sec. 6. (a) The state department of health shall collect immunization data on school age children using the state immunization data registry. Each school corporation shall ensure that all applicable immunization information is complete in the state immunization data registry not later than the first Friday in February each year. The state department of health shall use the data to create aggregate reports.

(b) The state department of health and the local health department shall, for good cause shown that there exists a substantial threat to the health and safety of a student or the school community, be able to validate immunization reports by onsite reviews or examinations of nonidentifying immunization record data. This section does not independently authorize the state department of health, a local department of health, or an agent of the state department of health or local department of health to have access to identifying medical or academic record data of individual students attending nonaccredited nonpublic schools.

(c) The state department of health has exclusive power to adopt rules for the administration of this section.

As added by P.L.1-2005, SEC.18. Amended by P.L.231-2005, SEC.45; P.L.80-2007, SEC.3; P.L.208-2015, SEC.17.

IC 20-34-4-7

Repealed

(As added by P.L.1-2005, SEC.18. Repealed by P.L.1-2009, SEC.174.)



**SUMMARY REPORT ON THE IMMUNIZATION STATUS OF
FIRST GRADE STUDENTS ENROLLED IN SCHOOL
SCHOOL YEAR 2005-2006**

State Form 49455 (R7/3-05)
IC 20-8.1-7-11

1

Name of School Corporation		CODES	
Name of School		County #	
Address of School		Corporation #	
City	County	School #	
Zip Code	School Telephone No.		

Each school that has their own school number listed in the Indiana School Directory, published by the Department of Education, must submit a **separate** report. The answer for each box below must be a number (**No Check Marks, etc.**)

Enter in box the number of first grade students in your school: **A.**

Number of students from Box "A" above having completed immunizations: **B.**

Use the work sheet for the minimum complete immunizations. Students listed in this category need no further follow-up.

EMPTIONS:

Number of students from Box "A" above who have a medical contraindication on file: **C.**

A physician's signed statement, verified annually and kept in your school immunization records, is required.

Number of students from Box "A" above who have a religious objection on file: **D.**

A statement, signed and verified annually by a parent/guardian stating the objection, must be on file in your school immunization records.

Number of students from Box "A" above **NOT** complete and having no exemption on file. **E.**

Enter here a number (other than 0 in Box "E") then Boxes "F" thru "N" **must** be completed.
List all Students that fall into these categories (**Not Doses**):

REASONS	Record not on file	Need DTP/DTaP/DI/Td	Need Polio	Need Hepatitis B	Need 1 st Measles	Need 2 nd Measles	Need Rubella	Need Mumps	Need Varicella
	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)

Return this form to:
Indiana State Department of Health
Immunization Program, 6A
2 North Meridian Street
Indianapolis, IN 46204-3003

Signatures: _____
Superintendent

Prepared By

School Health Report for 2014 - 2015 for the State of Indiana (All)

	K	1	2	3	4	5	6	7	8	9	10	11	12	TOTAL
# Total Students	79210	84003	81699	82462	77606	80578	75347	77397	81963	80529	77783	74105	72057	1024739
# Vision Tested	31485	71698	6044	80160	5344	78663	3135	3815	76865	1388	2250	1697	418	362962
# Passed Vision	26843	58651	5037	66724	4466	65684	2534	3331	63653	991	1939	1438	263	301554
# Failed Vision	4349	12063	958	12717	973	12029	674	588	12134	323	288	212	105	57413
# Borderline Vision	363	905	76	758	129	725	52	234	1067	14	21	9	2	4355
# Hearing Tested	41463	80670	7067	5579	76227	4996	3737	72949	5936	2980	72034	2579	1014	377231
# Passed Hearing	39846	77323	6917	5357	72869	4703	3548	68938	4934	2700	69253	2482	926	359796
# Failed Hearing	1281	1972	252	263	2085	190	199	1815	335	127	1395	101	78	10093
# Completed Immunizations	73840	81308	79423	79473	76231	76737	72191	73661	77760	78523	77099	71035	62874	980155
# In-Process Immunizations	5004	1663	1084	960	862	1427	2824	2120	2040	1577	1427	1710	5230	27928
# Religious Objection	1345	1144	1073	912	865	787	1024	916	970	846	801	709	1086	12478
# Medical Exemption	214	170	182	142	185	166	244	250	382	341	387	452	669	3784

Total Schools Submitted:	1949
Total Kindergarten Students tested for MCT:	21333
Total 1st Grade Students tested for MCT:	49601
Total Kindergarten Waiver granted for MCT:	36
Total 1st Grade Waiver granted for MCT:	130

U.S. DOE Presentation Regarding Immunization Records and FERPA (January 2015)

- At the elementary or secondary school level, students' immunization and other health records that are maintained by a school district or individual school, including a school-operated health clinic, that receives funds under any program administered by the U.S. Department of Education are "education records" subject to FERPA, including health and medical records maintained by a school nurse who is employed by or under contract with a school or school district.

- School Nurse Records –
 - Vaccination records that are directly related to a student and maintained by a school nurse who is employed by, or under contract to, the school are considered "education records."
 - Vaccination information from education records may not be shared with outside parties without parental consent, unless an exception applies.

- Signed and dated consent is generally needed for a school to share vaccination records to public health authorities (e.g., for entry into an immunization registry) or to the child's health care provider (e.g., for inclusion in the child's health care record).
- Schools, in collaboration with their health departments and local health providers, must carefully consider how to obtain consent from parents for potential information sharing.
- Obtaining consent to share vaccination information on certain populations can be challenging, such as
 - Children in foster care
 - Children not in the physical custody of a parent or guardian

If public health department officials provide vaccines at the school site to students, are any records generated by the vaccine campaign subject to FERPA or to the HIPAA Privacy Rule?

- If health officials, such as individuals from the local health department, come on campus and oversee the vaccine administration, any records that the health officials create and maintain would not be subject to FERPA. However, any records or recorded information (or copies of records) provided by health officials to school officials that directly relate to a student and are maintained by the school would be "education records" subject to FERPA.

If a student is vaccinated by a personal physician and brings the vaccination record to the school, does that become part of the student's education records and, if so, can that record be shared with the health department to allow the student to be counted as "vaccinated"?

- If the parent (or the physician) provides the information to the school, and it is maintained by the school, it is an "education record" under FERPA. As such, it can only be shared with the health department either with consent or under one of the exceptions to the general consent requirement in FERPA, such as under the health or safety emergency exception.

Immunization Guidelines for School Nurses

The guidelines below are provided as a reasonable time frame for schools to use to ensure each school is meeting the same baseline expectations and are intended to be the minimum expectations for schools to meet the requirements of IC 20-34-4. If schools reach the goals listed below ahead of the proposed time line, and/or are able to enter more grade levels than are listed below into the CHIRP database, schools are encouraged to do so.

AUGUST – OCTOBER

- Verify the immunization status of all enrolled students by reviewing the records in the CHIRP data base and records provided by parents – concentrating on the following groups:
 - Students in grades K and 6
 - Students newly enrolled in any grade
 - All other students, in all other grades
- Make a list (spreadsheet) of those students in each of the following categories:
 - Incomplete (IC)
 - Religious Objection (RO)
 - Medical Exemption (ME)
- Contact the parents of those students that are incomplete to obtain updated records or a written appointment schedule from a health care provider stating the dates the child will receive the missing vaccinations
- Contact the parents of those students who have a religious objection or a medical exemption to ensure these waivers have been updated and signed on an annual basis

OCTOBER – NOVEMBER

- Enter all student immunizations into the school data base
- Run a report showing all those students who are not complete
- Update your lists of those that are IC or have an expired RO or ME

DECEMBER

- Send a second notice to parents of students that are IC or have not filed an annual RO or ME
- Log into CHIRP and select those students, that you have parental permission for, to add these students to your school so that they can be included in your CHIRP school report

JANUARY

- Run a CHIRP report for all students in grades K and 6
- Compare your school list of IC to those listed in CHIRP as IC
- Enter into CHIRP any immunizations, with parent written permission, that the school has that are missing in CHIRP (a sample permission form can be found by clicking [here](#))
- Enter any immunization found in CHIRP that is missing from the school data base
- Ensure you have entered each student, concentrating first on students in grades K and 6, that the school has written permission from parents for into the CHIRP data base by February 1

APRIL

- Send a note home to parents stating that their students (who are still not in compliance) will not be allowed to attend the first day of school next year or will be excluded after 20 school days without proper proof of immunizations – whichever is the school policy

MAY

- Complete the School Health Report by June 15 (instructions for completing the report can be found [here](#))