



## **Frequently Asked Questions for Parents: School and Child Care Immunization and Exemption Rates**

### **Why am I receiving this information?**

A change in the law requires schools and child care programs to share their immunization rates with parents. Senate Bill 895 was passed in 2015.

### **What level of immunization is needed to protect the school or child care?**

We aim for at least 95% of children to be immunized for community protection, though the percentage varies by disease. When 95% of children are vaccinated in a school or child care, this reduces the chance of spreading the disease among vulnerable individuals.

### **Is my child at risk by being in a classroom with non-immunized children if my child is vaccinated?**

Vaccines are not 100% effective for every child. The chance of your child being exposed to a vaccine-preventable disease increases if some of their classmates have not been vaccinated. The best defense is not to be exposed to the disease in the first place. The second best defense is to be vaccinated.

### **Who is most at risk of vaccine preventable diseases?**

Vulnerable populations, including young children, those medically not able to be vaccinated, seniors, and medically fragile individuals, are most at risk of vaccine preventable diseases. But even healthy individuals can contract these diseases, especially if they have not been vaccinated.

### **What is a nonmedical exemption?**

A nonmedical exemption allows a parent to decline some or all vaccines for their child. The child is considered susceptible for any exempted vaccine. If there is an outbreak at the school or in the community, children with exemptions may not be allowed to attend school or child care until the risk of infection is past.

### **What is a medical exemption?**

A medical exemption is issued when a child cannot get a vaccine for a medical reason. Some examples include a child who is allergic to the vaccine, or a child who is undergoing chemotherapy. These children are medically unable to receive some vaccines, so they rely on others being vaccinated to protect them. If more people are vaccinated, a disease has a lower chance of spreading, thereby protecting those with medical exemptions.

### **Why are some children “not counted”?**

Children may be enrolled at two different sites. The main site would report on the child. The secondary site would include the child in the number not to be counted. An example is a child attending school and then going to child care after school. The school includes the child in their report, but the child care does not count them.

### **Why aren't children 18 months or younger included?**

Young children are still in process of receiving vaccines every few months. They are up-to-date but not fully protected with the required number of doses against all of the vaccine-preventable diseases. Therefore, children 18 months or younger are not included in calculating the immunization rates.

### **Why is the Hepatitis A immunization rate different?**

The rate for Hepatitis A vaccine may be different than from other vaccines because this vaccine is required for different grades. In school year 2015-2016, students in K – 7<sup>th</sup> grade are required to receive this vaccine. One additional grade will be required to have Hepatitis A vaccine each school year.

### **Why are there different reports for preK and grades K-12?**

Children younger than kindergarten have different immunization requirements than students in grades K-12 because of their age.

### **Why did I not receive information from my child's small school or day care?**

Programs with fewer than 10 children on their immunization report are not required to share their rates. Sharing immunization rates for programs with small numbers of children risks the loss of confidentiality. Registered child care programs are also exempt from the requirement to share immunization rates.