

Diana Bruce

ADVOCATE for THRIVING STUDENTS

Boosting School Immunizations Compliance:
Practical Strategies for Effectively
Engaging Schools and Families



CME and CE Information

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- American Dental Association Continuing Education Recognition Program (ADA CERP)
- American Psychological Association (APA)
- Association of Social Work Boards (ASWB)
- Commission on Dietetic Registration (CDR)



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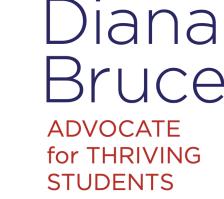
Hello, I'm Diana Bruce.

- 25+ years working at intersection of public health and education policy and programming
- Provide clients strategic planning, stakeholder engagement, policy development, coaching and training
- School advisor on childhood immunizations and communicable diseases
- Former school administrator for health and wellness
- Board member, yoga teacher
- Proud parent of young adults!

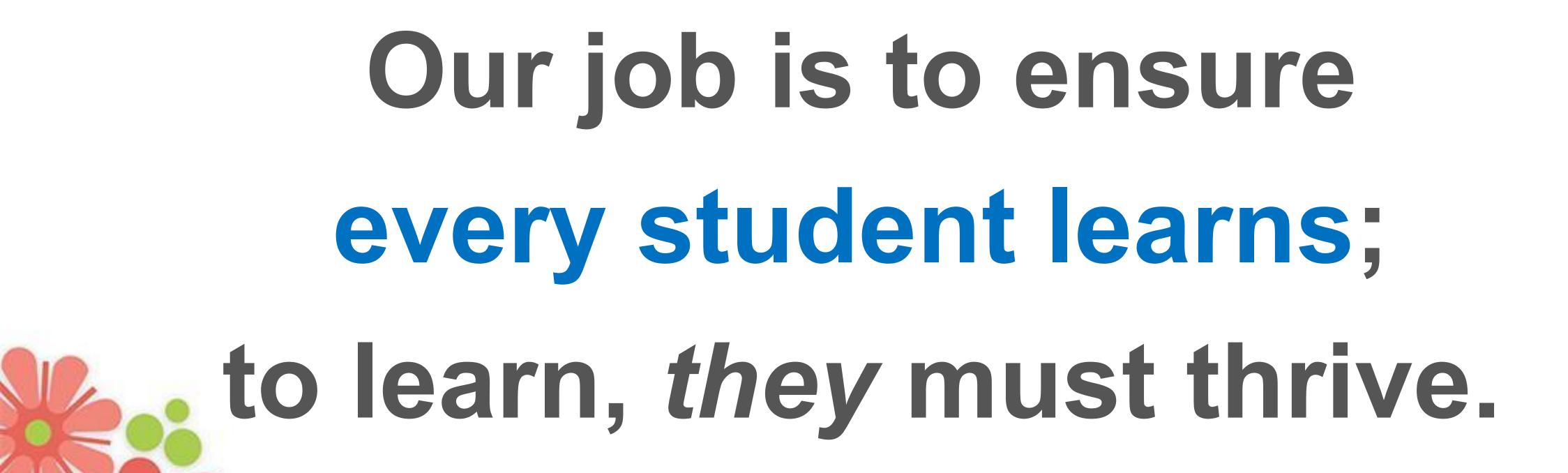
My approach



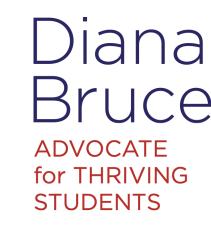
Pair radical empathy with sound public policy to engage communities in creating human-centered solutions



Why do I do this?







Why do you do this work?

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because families need us
                             helping the underserved
  helping people connect
             resource provider
                                     support families
                                                           empowering students and f
                          to be an advocate
nutrition is key
                  helper
                                                public health
                                 growth
                      to inspire
     assist patients
                                            help families along with
                     seeing people get healthi
     never boring
                                                       supporting kids families
                       improving access
               its fun
                                              to help my community
                            helping families
                             access to healthcare
```

Objective

- The participant will be able to analyze school immunization best practices and processes and recognize opportunities for celebration and improvement using a collaborative, resource-driven approach.
- The participant will be able to identify effective family engagement strategies that support the prioritization of immunization compliance and navigate around barriers to care.

Agenda





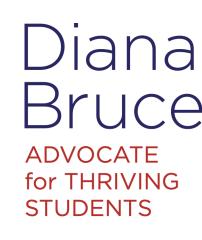
DC Case Study





Reflection and Action Steps





Immunization Programs in Schools

What do you remember about immunizations as a child?

Scary

Nothing

Shot = Iollipop

Intimidating

Pain, hated it

Needles

We were to get them and turn it in to school

Painful

We had to go to the scary health department

I was not asked if I gave consent for a vaccine

Standing in line to get a shot

Getting vaccines with my siblings before school

What do you remember about immunizations as a child?

I was not asked if I gave consent for a vaccine

Lining up in school for a Hepb vaccine

Don't have a single memory of receiving vaccines

Scary but never as bad as expected

Standing in line to get a shot

Lining up in the hall for the polio vaccine in a sugar cube (old nurse here!)

Pediatricians office only

Had to have them to go to school

Getting vaccines with my siblings before school

Blocked it out I guess?

Fun band-aids

Lollipop and cute sticker

Immunization Programs in Schools

- 1855 smallpox vaccine required for school in MA
- 1950s Polio vaccines in schools across the country
- 1970s U.S. goal: 90% children fully vaccinated
- 1979 DC law passed requiring ALL schools to collect immunization documentation from students, and excludes those not up to date
- 1980 ALL states require immunizations
 for school



https://www.mayoclinic.org/diseases-conditions/history-disease-outbreaks-vaccine-timeline/requirements-research

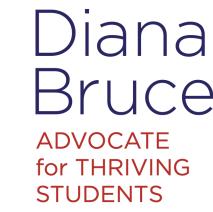


Why do schools focus on immunizations?

They have to (aka it's the law).

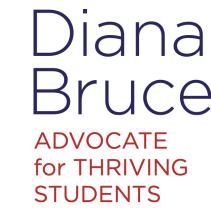
Students and staff are protected from diseases that can hurt them and cause harm to others.

Unimmunized students and staff miss A LOT of school if they're exposed. (i.e. unvaccinated person exposed to measles stays home for 21 days).





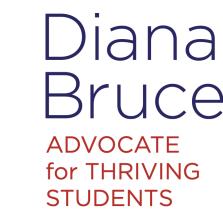
- Individuals protected from diseases that can hurt them.
- Immunizations protects others (parents/siblings/ /teachers.ect) in the students' circle.
- Huge economic and health savings from prevented cases of routine childhood illnesses.
- Immunized individuals protected from quarantine requirements that would keep them out of school for WEEKS if exposed (i.e. unvaccinated person exposed to measles would have to be home for 21 days).
- Families are engaged in the process and know that their school cared about their students' safety and well being.





- Students remained unprotected from life-threatening, vaccine-preventable diseases
- Herd Immunity threshold is not met leading to outbreaks
 - Ex: Over 95% of the population must be vaccinated against measles to prevent the spread of disease
- Outbreaks can lead to lengthy, multi-week quarantine periods at home for those exposed and unvaccinated
- Enforcement actions for schools that don't follow the law







What keeps you up at night when you think about childhood immunizations in your community?

Government policy changes

Federal policy impacting local

Misinformation spreading quickly on the internet

not having access to immunizations

The government lying to my patients and their families

The amount of people not vaccinating now

Misinformation guiding decision making for vaccinations

The people making the decisions that are uninformed

people being sick!!

Access

That people are no longer taking vaccines and preventable diseases seriously

funding cuts?

What keeps you up at night when you think about childhood immunizations in your community?

Kids who are immunocompromised, misinformation and uneducated

That I would love realistic PSAs showing the effects of preventable disease in unvaccinated persons

Hope Scholarship will hurt WV because more children are outside of the public school service and no one is watching them. I nat people are no longer taking vaccines and preventable diseases seriously

Exposure to unvaccinated in community

Irritation at vaccine deniers

tunding cuts?

People not vaccinated ...an outbreak!

We have great compliance in my community!





During the COVID-19 pandemic immunization rates fell sharply - leaving schools vulnerable to school operations disruption cause by outbreaks, and leaving students/staff vulnerable to vaccine-preventable illness and death.

In DC, schools enroll students, and then give them 20 school days to submit immunization records.

In DC, students must provide immunization records every year.

In DC, half the students are in public charter schools.

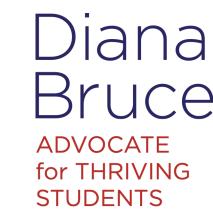






- Clear School Immunization Policy (https://osse.dc.gov/immunization)
- Prioritize 4 grades for school exclusion
- Increased resources for schools ... and coordination
- Communication, and then more communication
- Dedicated data tracking tools and practices to ensure improved communization and success.
- Public Charter School Board hired health consultants to advise charter schools in implementing the school immunization policy

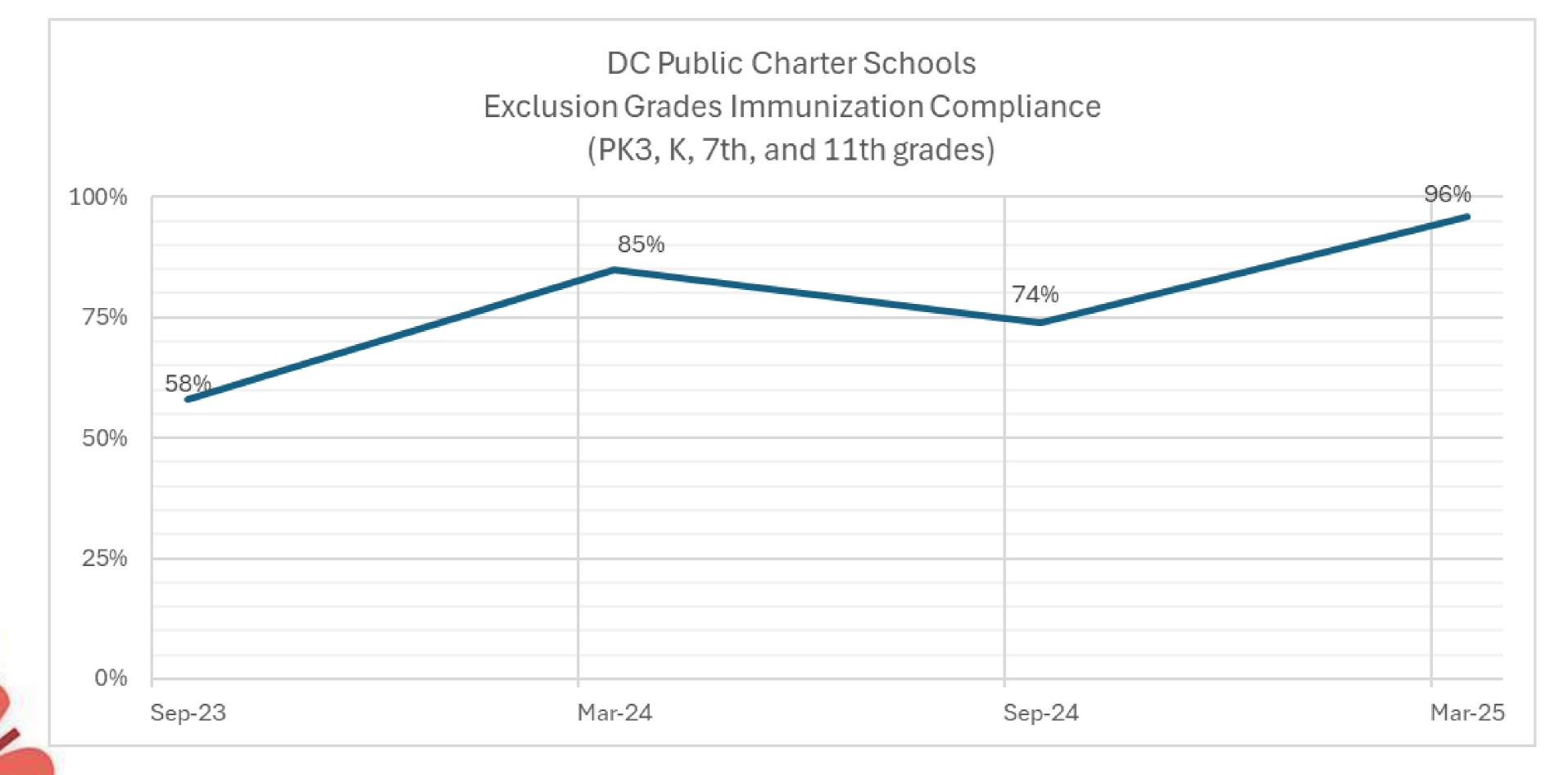


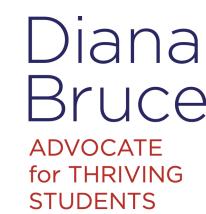


Case Study - The Results

Starting SY25/26 at 80%!!!







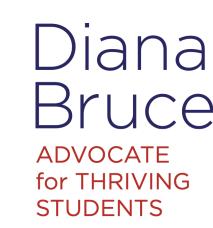




HUGE increase in immunization rates among exclusion grades!

- Vast majority of student got up-to-date
- Few students required to be excluded
- Families engaged and knew that their school cared about their students' safety and well being

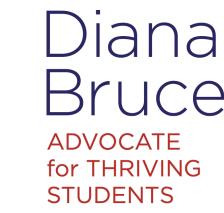






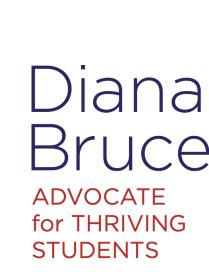
- o Partnership, Collaboration and Communication at every level
- State education agency policy, website and staff
- Health department immunization registry, staff TA and links to community providers
- Public Charter School Board investment







- Health consultant assigned to each charter school
 - 1:1 meeting with each charter school point of contact (that accepted offer) at start of school year
 - On-call technical assistance support by phone and email
 - Regular email updates
- Monthly community of practice in the fall
 - not feel alone
 - share and learn best practices
 - shared space for updates
- Individual support for corrective action LEAs

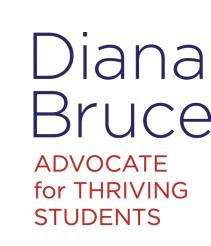


Case Study - The Results

Read more about it here!





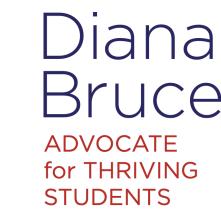






- Exclusion grades have seen progress, but overall PK-12 compliance is slower to rise (but they are rising!)
- Exclusion grades won't impact all students until SY29/30.
- Need to keep our eye on measles.
- Vaccine hesitancy is on the rise.
- Funding/support for immunization compliance varies each SY



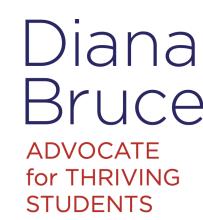




Grades Impacted by Current or Previous SY's exclusion grades immunizations requirements

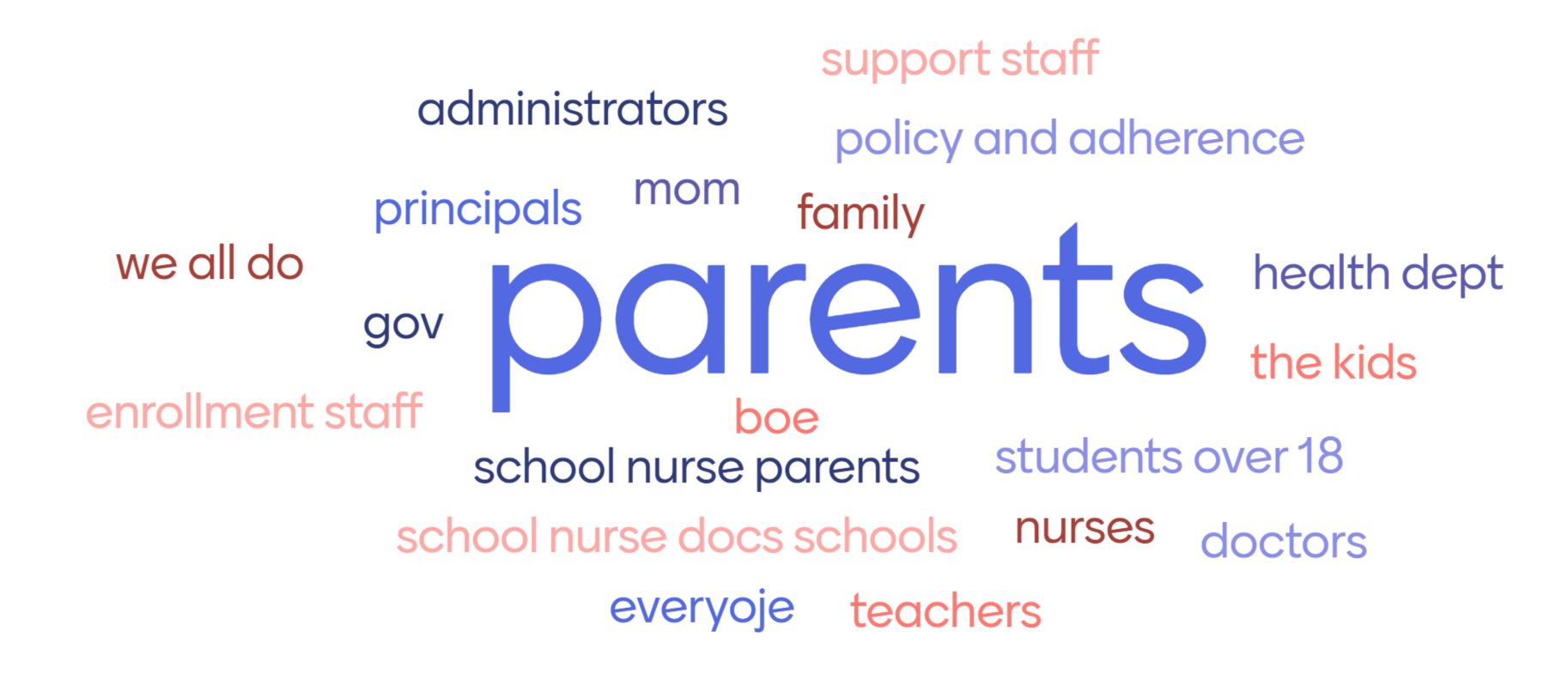
It will take until SY29/30 for every grade to have experienced an exclusion year.

Grade	SY24/24	SY24/25	SY25/26	SY26/27	SY27/28	SY28/29	SY29/30
PK3	x	x	x	x	x	x	x
PK4		x	x	x	x	x	x
K	x	x	x	x	x	x	x
1		x	x	x	x	x	x
2			x	x	x	x	x
3				x	x	x	x
4					x	x	x
5						x	x
6							x
7	x	x	x	x	x	x	x
8		x	x	x	x	x	x
9			x	x	x	x	x
10				x	x	x	x
11	x	x	x	x	x	x	x
12		x	x	x	x	x	x



Keys to Immunization Success

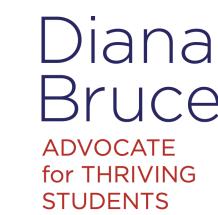
Who plays a role in getting to 100%?





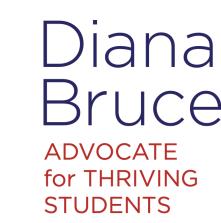
- Parent/Caregiver
- Pediatrician
- Student
- Immunization Point of Contact
- School Nurse/Health Tech
- Registrar
- School Health/Operations Director
- Campus Leader
- School/District Leader
- State Education Agency
- Community Immunization Provider







- Effectively use all available resources
- Work as a team within the school
- Provide consistent/persistent/creative family engagement
 - o "I mean what I mean"
 - AND meet all family notification deadlines
- Prioritize ongoing, regular data <u>entry</u>
- Prioritize ongoing, regular data <u>tracking</u>
- Share and celebrate progress/wins along the way
- Enforce exclusion



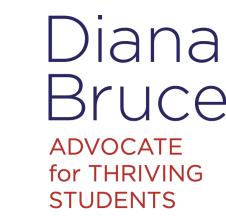






a numbers game +
being organized +
effective family engagement

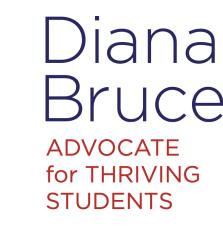




Communication with Families Identify the Pain Points

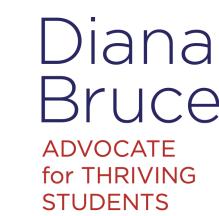
What questions do they have?
What barriers exist?
What are the biggest fears?







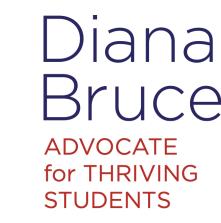
- Educate about importance of immunizations
- Communicate what immunizations are missing (in writing)
 - The first time they hear from your should NOT be after their student is facing exemption.
- Provide information about community immunization clinics/providers
 - List of providers that have same day appointments, longer hours, or pop-up clinics
 - What documentation do they need from the providers post immunization?
 - Providers that can communicate with ELL families
- Meet them where they're at; follow up notifications with phone calls/face-to-face contact
 - Multiple modalities and multiple times!





Empathy is seeing the perspective of someone else.



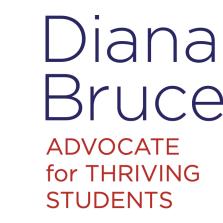






Active in our understanding of ourselves,
Active in our understanding of others,
Active in our sharing of other's feelings,
Active in showing up authentically, and
Caring like it's your child who needs the support





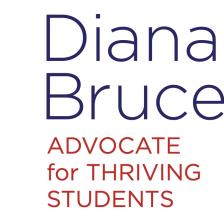
Empathy Is Hard Right Now

It's been a rough few years.

Compassion fatigue is real.

Take your time.

Have empathy for those you're asking empathy of.





- Remain curious and diligent
- Prepare for parent questions and pushback
- Meet health team where they are
- Fill knowledge gaps
- Manage influx of immunization documents
- Don't get left in the dark







Reflection and Action Steps

What support do your families and schools need?

Some supplies and information

A licensed nurse in each school.

Help understanding healthcare in the US and general help acclimating after refugee trauma. Also more Spanish speaking staff and clinicians

pat

Dental, vision, mental health,

Vaccines,

A vaccine refrigerator

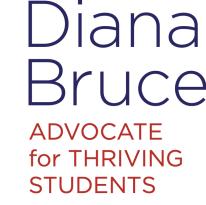
Parent education materials











What support do your families and schools need?

access to coverage

understanding

Communication

Convenient hours

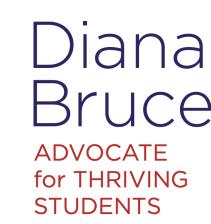


Education and communication to parents









Join at menti.com | use code 1646 7204

Mentimeter

What role can you play in meeting these needs?

Contact parents of missing vaccines.

Advocate!!!!!

Work with school to communicate needs to parents/families

Provide education and support

SBHC: Access to immunizations

Search for Grant funding

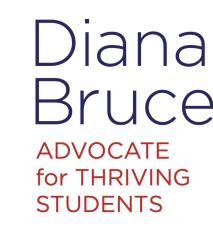
Have easy to access consent forms.

ms. Create a an area medical resources sheet for families

Put info out there on all platforms we use as a school

Reflection







Join at menti.com | use code 1646 7204

Mentimeter

What is one strategy you heard or thought of?

School nurse and school based health center open communication - work together to communicate with families.

Provide a safe space to ask questions knowledge is power! Would like a strategy for parents who refuse to provide an updated action plan or universal health certificate

We have become very strict with exclusion. Using our mobile unit for vaccine "blitz"

Communicate requirements and resources early and often

Action Steps







Mentimeter

What will you do this month, this school year, next school year to implement this strategy?

Working on building relationships with school nurses

Make sure all data is up to date before contacting parents

Sending regular notices

Have a contest/competition for classes with highest compliance

We begin day one of this year to prepare parents for the next year.

Offer parent forums to share information and encourage open dialogue

More empathy towards staff and community Provide education to parents teachers

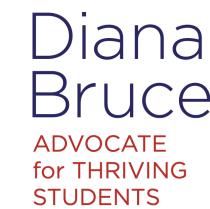
Weekly meetings with school nurses to keep up on list of students needing vaccines

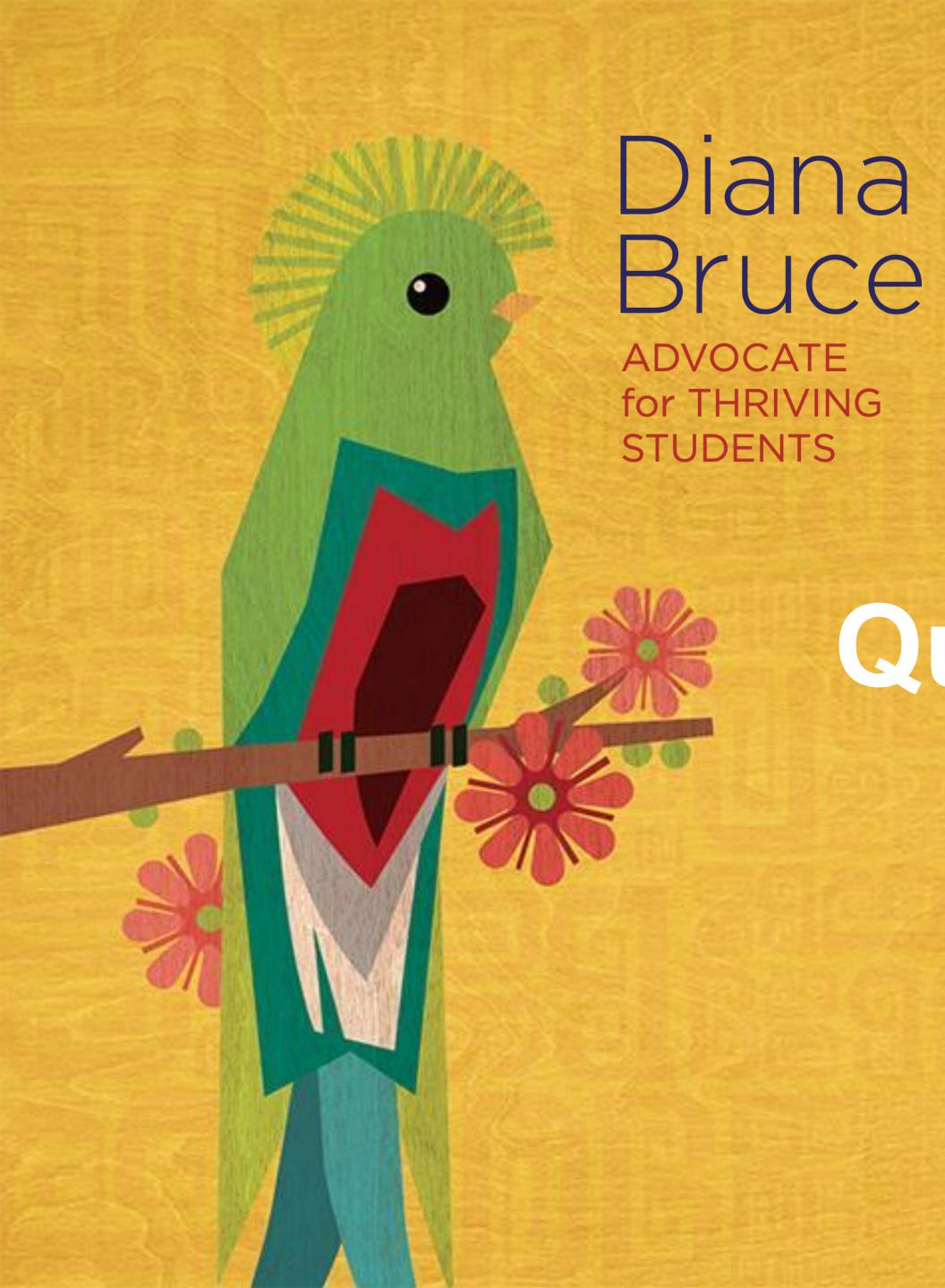
Communicate early and provide resources

Action Steps









Questions?



Diana Bruce **ADVOCATE** for THRIVING

Let's Stay Connected!



- 1.Reach out/sign up for my newsletter ("contact").
- 2. Schedule consultation ("let's chat").
- 3.Follow me on Linkedln: @dianakbruce

