



2020 Supplemental Budget Decision Package

Agency: 303 - Department of Health
Decision Package Code-Title: B3 - Improve Immunization Compliance
Budget Session: 2020 Supp
Budget Level: Policy Level
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Agency Recommendation Summary

School-reported data for the 2018-2019 school year shows county out-of-compliance vaccination rates ranged from less than one percent to more than 40 percent, indicating children and their communities are at risk for disease outbreaks. The Washington State Department of Health requests funding to implement a comprehensive system to decrease out-of-compliance rates in schools and child care settings. This system builds on already existing technology, provides education to health care providers, provides outreach to parents and vulnerable communities with low vaccination rates, and helps sustain the Washington State School Nurse Corps (SNC) delivery model which provides essential and required nursing services to school districts.

Fiscal Summary

Dollars in Thousands

Operating Expenditures	FY 2020	FY 2021	FY 2022	FY 2023
Fund 001 - 1	\$0	\$5,131	\$5,105	\$5,105
Total Expenditures	\$0	\$5,131	\$5,105	\$5,105
Biennial Totals		\$5,131		\$10,210
Staffing	FY 2020	FY 2021	FY 2022	FY 2023
FTEs	0.0	3.0	3.0	3.0
Average Annual		1.5		3.0
Object of Expenditure	FY 2020	FY 2021	FY 2022	FY 2023
Obj. A	\$0	\$219	\$219	\$219
Obj. B	\$0	\$81	\$81	\$81
Obj. C	\$0	\$4,562	\$4,562	\$4,562
Obj. E	\$0	\$223	\$203	\$203
Obj. G	\$0	\$10	\$10	\$10

Object of Expenditure	FY 2020	FY 2021	FY 2022	FY 2023
Obj. J	\$0	\$6	\$0	\$0
Obj. T	\$0	\$30	\$30	\$30

Package Description

Problem Statement:

In communities across Washington State, there are pockets of children who are not fully vaccinated.

Based on the school reported data for the 2018-2019 school year, county out-of-compliance vaccination rates ranged from less than one percent to more than 40 percent. This places children and communities at risk for vaccine-preventable diseases. Schools and child care providers carry the burden of ensuring children are in compliance with state immunization laws. A strengthened comprehensive system is needed to support immunization compliance work to help decrease out-of-compliance rates and increase childhood immunization rates.

Student out-of-compliance status occurs for two reasons:

- The student has completed all required vaccinations, but the parent has not submitted documentation to the school; or
- The student has not completed all of the required immunizations and the parent has not provided documentation of an exemption.

Tracking and monitoring out-of-compliance status is an administrative burden on the school nurse and administrative staff.

DOH received state funding over the past few years to complete technology improvements and initiate development and implementation of the Washington State Immunization Information System (WAIIS) School Module, a tool to support schools in conducting immunization compliance work and efficiently identifying at-risk children. This was the first step to a larger comprehensive system that includes increased support for school nurses, data collection and assessment, and building and maintaining collaborative relationships with partners and stakeholders.

School districts do not have consistent nursing services for all schools across the state. They have limited to no access to a nurse, making it difficult to do immunization compliance work in addition to the other services they are mandated to provide. These services help protect students and the surrounding communities from diseases that vaccines prevent. The School Nurse Corps (SNC) was originally funded by the Washington State Legislature to provide direct nursing services, supervision, and program administration for Class II districts (small rural districts) so that those districts will receive nursing services at least one day per week. Funding also included a proviso to provide health education, staff training, professional development opportunities, and evaluation. Since 2000, the number of laws invoking school nursing services has increased, placing a strain on available resources and nursing capacity to comply. The erosion of SNC funding over the past two decades, coupled with dramatic increases in demand and expansion of school health requirements, has left many districts lacking consistent nursing services. This leaves schools ill prepared to meet the wide array of student health needs.

The Centers for Disease Control and Prevention (CDC) immunization grant funding is not adequate to cover the work needed for improving school and child care immunization compliance rates. DOH requests funding to support and sustain a comprehensive system needed to increase childhood immunization compliance by supporting the continued use of the WAIS School Module and associated staffing needs, increasing engagement with vulnerable communities, and ensuring adequate health staffing and technical assistance for schools and child care providers

Proposed Solution:

The funding requested in this proposal will support the implementation of a multi-pronged approach supported across agencies that support child care providers and schools to increase immunizations and reduce vaccine-preventable disease outbreaks.

- **Support schools in addressing out-of-compliance status:**

Provide schools adequate health resources, including additional nursing services supports and increase the use of available technology to support tracking and management of immunization records;

- **Support child care immunization compliance work:**

Provide child care centers and Family Homes adequate health resources and increase the use of available technology to support tracking and management of immunization records;

- **Provider education:**

Provide education and outreach to 4,295 providers including obstetricians/gynecologists and other prenatal and pediatric providers, such as general practitioners, physician assistants, registered nurse practitioners and midwives to help support parents, expectant parents, and for family planning in advance of pregnancy for a healthier infant;

- **Outreach to communities with low vaccination rates:**

Increase community engagement with and raise awareness among providers, community health workers, trusted community leaders, parents, and individuals by providing immunization education and resources and addressing vaccine hesitancy with a health equity and culturally appropriate lens.

Support Schools in Addressing Out-of-Compliance Status:

Washington State Immunization Information System (WAIS) School Module

In the 2017-2018 school year, reporting data was pulled for the first time directly from the WAIS School Module for participating schools and proved to be the “gold standard” for school data quality. It enhanced the accuracy of the data used by the public, other agencies, and the CDC. School nurses have added over 115,000 immunizations, making the WAIS even more robust. More importantly, this improved the accuracy of the student’s lifetime immunizations record. As of June 12, 2019, the School Module has been implemented in more than 62 private schools and public school districts, which represents about 146,670, students (12.2 percent of the student population). This still leaves 795 private schools and public school districts and

1,052,449 students without this cost-effective tool. Getting all school districts to use the IIS School Module needs to be a top priority for the state. The resources outlined below to address barriers will help to continue program implementation.

Additional resources to support schools with immunization compliance work includes:

- DOH staffing focused on school immunization compliance activities to provide technical expertise on expanding resources and use of the WAIS School Module;
- Communication and outreach activities including cross-agency support with the Office of the Superintendent of Public Instruction (OSPI) and the Department of Children Youth and Families (DCYF);
- Community engagement and assessment;
- Compliance policy work and data assessment;
- OSPI staffing focused on cross-agency collaboration.
- Engagement for assessment and improvement in clinical services focused on the reduction of out-of-compliance rates, provide oversight, and ensure the effectiveness of immunization compliance work.

Support for School Nurse Staffing.

Some schools, such as those in small rural districts (or Class II districts) have limited or no access to a school nurse. Class II districts make up the majority of school districts in the state. Increasing nursing services to one day a week will help ensure each Class II district has at least a minimum amount of services to meet the basic school health needs of their students, including immunization compliance work. These districts will have ready access to nursing expertise and service delivery, comply with school health services requirements and will provide better care for students. This proposal includes funding for Registered Nurses (RNs), Regional Nurse Administrators across Educational Services Districts (ESDs), additional administrative assistant support for ESDs and OSPI, and a Health Services Nurse at OSPI. It also includes increased funding for the SNC program so every Class II district receives consistent nursing services. This approach will capitalize on the existing infrastructure and capacity of the ESDs to administer needed services that includes immunization compliance work. Increasing capacity will also help with preparedness for and during vaccine-preventable disease outbreaks, such as measles, similar to that experienced recently in Clark County and continue to experience in other areas of our state.

Support Child Care Immunization Compliance Work:

Some of our most vulnerable children, and in some cases those at highest risk of disease, are cared for by child care providers. Currently, there are limited resources to support Childcare Health Consultants to visit and ensure a safe environment in centers. Their work is limited to the specific areas where an infant care is provided. In most counties, their salaries are paid by the child care center's owner. Additionally the consultants' current reviews do not include an assessment of immunization status for either the infant or those providing care.

Additional staffing is requested to provide child care providers with DOH support to improve child care immunization compliance. The support will include:

- Technical expertise on expanding resources and use of the WAIS School Module;
- Communication and outreach activities including cross-agency support with OSPI and DCYF;
- Community engagement and assessment;
- Compliance policy work, and

- Data assessment.

Provider Education:

In 2015, Senate Bill 5143 directed DOH to develop and provide resources for expecting parents regarding recommended childhood immunization and encourage discussion between parents and providers on this topic.

This proposal requests additional resources to support required education and outreach activities to Washington health care providers, including ongoing development and distribution of immunization education materials providers can share with parents.

Outreach to Communities with Low Vaccination Rates:

Individuals cluster in communities, spending time together in public spaces. Research has shown engaging with trusted leaders in the community can positively impact immunizations (Peterson, McNabb, Maddali, 2019)[1].

This requests provides additional staffing to support the emerging need for identifying and understanding communities with low vaccination rates. This will allow the Department to address the needs of groups within Washington communities who have unique reasons for approaching vaccination with hesitancy or not vaccinating at all.

[1] Peterson, P., McNabb, P., Maddali, S. R, Health, J. Santibanez, S. (2019). Engaging communities to reach immigrant and minority populations: The Minnesota immunization networking initiating. Public. <https://doi.org/10.1177/0033354919834579>. Accessed 6/28/19.

Assumptions and Calculations

Expansion or alteration of a current program or service:

The table below reflects the budget for the entire immunization program:

Immunization Program Budget		
	2015-2017	2017-2019
GFS	\$ 2,362,268	\$ 2,583,027
Federal	\$ 16,740,903	\$ 12,466,455
*Total	\$ 19,103,171	\$ 15,049,482
<i>*excludes Universal Vaccine Purchase Account</i>		

The federal immunization grant provides the capacity to assess and report school immunization data but does not provide resources to fully fund a comprehensive system that includes education and resource development for increasing immunization compliance and childhood immunization rates.

In fiscal year 2017, DOH received funding from the Legislature for a one-time cost of \$165,000 for development of the WAIS immunization validation tool and technical improvements to the WAIS School Module, and on-going costs through fiscal year 2019 of \$346,000 per year. This supported 2.0 FTE and associated costs (\$233,000) and an inter-agency agreement with OSPI to support staff for student immunization compliance work (\$113,000). This funding ended on June 30, 2019.

This request will add to already existing funding and activities supporting immunization compliance throughout the state.

Detailed assumptions and calculations:

Department of Health:

School and Early Learning Immunization Coordination

DOH requests \$153,000 in ongoing funding for a School and Early Learning Immunization Coordinator (1.0 FTE – Health Services Consultant (HSC) 3 and related costs) to identify areas of need and barriers to increase childhood immunization compliance among schools and early learning programs and implement strategies to address identified gaps. In collaboration with OSPI, DCYF and DOH, this individual will identify and implement strategies to reduce out-of-compliance rates in schools, preschools, and child care providers while building and maintaining partnerships with key school and early learning stakeholders. This position, working with clinical oversight, will conduct communication and outreach strategies, conduct presentations for training, develop and management written materials and webpages for stakeholders, and support compliance policy work related to immunizations to school and early learning environments. This position will also provide technical assistance and support for schools, preschools and child care providers, provide support for the evaluation of school and early learning immunization strategies and interventions and lead strategies to collect stakeholder feedback, which may include surveys, focus groups, etc.

School and Early Learning Immunization Data and Systems

DOH requests \$284,000 in ongoing funding for a School and Early Learning Immunization Data and Systems Coordinator (1.0 FTE – HSC 3 and related costs) to manage and update school and early learning information in the WAIS and School Module systems including information pertaining to immunization requirements, school/early learning programs, and user accounts. This position will support expansion and use of the IIS and WAIS School Module system by providing technical assistance and support to schools and early learning programs. The position will also establish and manage data sharing agreements with collaboration partners, conduct directory uploads for schools and early learning programs on an ongoing basis.

This position will also provide ongoing training and collaborate with the IIS contractor (Science and Technology Corporation or STC) to collect and assess school and early learning immunization compliance data and work to ensure data quality in the WAIS and School Module systems:

- Conduct trainings and develop resources for schools and early learning programs using the WAIS and School Module systems;
- Identify and implement needed changes for problem remediation or system improvements for the WAIS and School Module to ensure user satisfaction and functionality;
- Report, track, and manage system bug tickets relevant to school and early learning programs;
- Build and maintain a relationship with the WAIS system vendor, STC;
- Respond to and manage school and early learning data requests;
- Lead the evaluation of school and early learning immunization strategies and interventions and provide support in strategies to collect stakeholder feedback, which may include surveys, focus groups, etc.

Provider Education

Additional resources to support required education and outreach activities to Washington health care providers, including ongoing development and distribution of immunization education materials providers can share with parents, \$27,000 in fiscal year 2021 and ongoing for increased inventory of plain talked materials and fulfillment center cost increases.

Community Engagement and Assessment

DOH requests \$154,000 in ongoing funding for a Community Engagement and Assessment Health Consultant (1.0 FTE – HSC 3 and related costs) to help increase immunization rates among populations who approach vaccination with hesitancy by reaching out to key community advocates, building trust within the community, identifying unique barriers, jointly developing with community members the tools they need to overcome these barriers, and assisting health care providers in how to best approach and talk to patients about vaccines in a supportive and culturally competent manner. This position will also support development of a childhood immunization training module at a one-time cost of \$20,000 in fiscal year 2021 for Community Health Workers.

Total DOH staffing and related costs:

Fiscal Year 2021 – 3.0 FTE HSC 3, \$640,000

Fiscal Year 2022 and ongoing – 3.0 FTE HSC 3, \$614,000

Office for the Superintendent of Public Instruction:

Through an interagency agreement, DOH will contract with OSPI for the following in support of Support Schools in addressing out of compliance status

OSPI requires \$152,000 in ongoing funding for a cross-agency liaison (1.0 FTE Immunization Program Supervisor) and administrative assistant (.30 FTE Administrative Assistant 3) to support assessment and improvement in clinical services directly focused on the reduction of out of compliance rates. These staff will coordinate with stakeholders including school nurses and administrators, support interagency work with the Department, and assist in identification, education, outreach and other support to low-vaccination rate communities providing education and support. These positions will provide oversight and ensure effectiveness of immunization compliance work including help to achieve statewide goals, objectives, and outcomes for school health services; the development of school health services structures and processes; and engagement with district administration and local school teams.

School Nurses – Registered Nurses (26 FTEs).

OSPI requires \$3,629,000 in ongoing funding to increase nursing staff in schools to support immunization compliance, reporting requirements, and other health related services by providing direct nursing services to Class II districts at least one day a week.

This will help relieve administrative burdens related to tracking and follow up with students who are in conditional status or out of compliance with immunization requirements for school and child care entry. The need for school nursing services in the school setting has steadily increased over time, yet many schools still have limited time or access to registered nurses who provide necessary and required health care services for school-aged children, including immunization compliance.

School Nurse Corps (SNC) Administrators (2.7 FTEs)

OSPI requires \$382,000 of funding to sustain the SNC Program and relieve burdens on school districts by supporting the work of other state and local agency goals related to improving student health outcomes through building partnerships with DOH as well as partnerships with other agencies with common goals which include the DCYF, the Washington State Health Care Authority (HCA), the Washington State Board of Health (SBOH), and local health jurisdictions (LHJs). This will help increase capacity of Educational Service Districts (ESDs) to provide technical assistance, consultation, and professional development for nurses in all districts, assist in orienting and mentoring new school nurses, conduct annual assessment of health services, and tailor quality services to the needs of each district, especially those that are geographically isolated.

Administrative Assistants (4.5 FTEs)

OSPI requires \$328,000 funding for administrative staff to adequately support ESDs.

Total interagency agreement costs:

Fiscal Year 2021 and ongoing: \$4,491,000

Total Request:

Fiscal Year 2021 - 3.0 FTE HSC 3 and \$5,131,000

Fiscal Year 2022 and ongoing – 3.0 FTE HSC 3 and \$5,105,000

Workforce Assumptions:

See attached financial calculator (FNCAL)

Strategic and Performance Outcomes

Strategic framework:

This proposal is tied to Results Washington Goal 4: Healthy and Safe Communities:

Additionally, Goal 2 in the Agency Strategic Plan is to ensure all children achieve their highest health potential. Objective 3 to support this goal is to decrease out-of-compliance rates and increase immunization rates in children with a primary strategy being to continue implementing and maintaining the WAIS School Module. The Healthy People 2020 goal is to have 95 percent of kindergartners fully immunized and DOH is striving to improve our kindergarten immunization rate from 86.3 percent to meet or exceed this target. Implementing a comprehensive system will improve immunization compliance rates in toddlers so they start kindergarten fully immunized.

Performance outcomes:

Reduction to overall out-of-compliance rates in schools and early learning settings;

Reduction in administrative burdens on school nursing staff regarding tracking and follow up with students in conditional and out-of-compliance status.

Other Collateral Connections

Intergovernmental:

Immunization compliance tools, supports, and data that will be implemented with this proposal will be available to tribes and supported through ongoing work with tribal liaisons. Tribes are supportive of this.

The Department often collaborates with schools to ensure students are protected against vaccine-preventable diseases, which includes other agencies such as DCYF, HCA, SBOH, and local health jurisdictions

Stakeholder response:

In support: WA Chapter of AAP, WSMA, SNOW, some parents and school administrators.

In opposition: vaccine resistant groups, some parents and school administrators.

Legal or administrative mandates:

This request is not driven by a legal or administrative mandate against the state.

Changes from current law:

This request does not require any changes to statutes. Recent rulemaking efforts will help support ongoing and future use of the WAIS School Module.

State workforce impacts:

This request does not impact facilities and workplace needs.

State facilities impacts:

This request does not impact facilities and workplace needs.

Puget Sound recovery:

This request is not related to Puget Sound recovery efforts.

Reference Documents

- PL B3 Improve Immunization Compliance-FNCAL.xlsm

IT Addendum

Does this Decision Package include funding for any IT-related costs, including hardware, software, (including cloud-based services), contracts or IT staff?

No