

Immunizations and Arizona's Young Children

Some Arizona Facts:

Ten years ago, Arizona's vaccine coverage level for early childhood was at 67%, well below the national average. Now it is at 76% and comparable to the national average.

Many gains have been made in the effort to control immunization preventable disease. Since the 1990s, pneumococcal, hep A, Hib, and varicella diseases in young children have plummeted. Arizona reached the Healthy People 2010 goal of 90% immunization coverage for Polio, Measles, Mumps, Rubella, Hepatitis B and Varicella vaccination of 19 through 35-month-old children.

Despite these gains, outbreaks of vaccine preventable diseases still occur, as evidenced by

- The 2008 measles outbreak in Pima County, in which measles was transmitted to 13 children and adults. Six hundred possible cases had been investigated, and public health outbreak control costs were upwards of \$800,000. Ironically, most measles cases were exposed to the disease while they were in health care facilities.
- Yearly pediatric deaths from influenza, pertussis, meningitis and other diseases.

The ADHS Child Care Rules require a child to be up to date with immunizations in order to be enrolled in a preschool or provide a statement signed by the child's family that the child will not be receiving immunizations because of religious beliefs of the family. The child must also stay current in their immunizations.

R9-5-305. Child Immunization Requirements

- A. A licensee shall not permit an enrolled child to attend a facility until the facility receives either a child's written immunization record or an exemption affidavit.
 1. A child's immunization record provided by a parent shall contain the information required by A.A.C. R9-6-703 provided by a health care provider, stating that the child has received all current, age-appropriate immunizations required by the Department under A.A.C. R9-6-701(A) and (B).
 2. An exemption affidavit provided by a parent shall consist of:
 - a. A statement, signed by a child's health care provider, that the immunizations required by the Department as prescribed in A.A.C. R9-6-701(A) and (B) would endanger a child's health or medical condition; or
 - b. A statement, signed by a child's parent, that the child is being raised in a religion whose teachings are in opposition to immunization.
- B. A licensee shall ensure that a staff member updates a child's immunization record on the child's Emergency, Information, and Immunization Record card each time a parent provides the licensee with a written statement from a child's health care provider that the child has received an age-appropriate immunization required by R9-6-701(A) and (B).

- C. If a child's immunization record indicates that a child has not received an age-appropriate immunization required by A.A.C. R9-6-701(A) and (B), a licensee shall ensure that a staff member:
1. Notifies a parent in writing that the child may attend the facility for not more than 15 days from the date of the notification unless the parent provides the facility with written evidence of the required immunization or an exemption affidavit as prescribed by subsection (A)(2); and
 2. Documents in the child's immunization record the date on which a parent is notified of an immunization required by the Department.

The required vaccinations can be found at http://www.azsos.gov/public_services/Title_09/9-06.htm#Article_7.

How a child becomes immunized:

Most children are immunized through a private provider. Immunizations are also available from health plans, community health centers and county health departments. As well, there are free children's shot clinics provided by fire departments, county health departments, etc. Clinic locations in Maricopa County are available at <http://www.mcchip.org/immunize.html> or <http://www.cir.org/>. Information about where a child can get vaccinated in the rest of the state can be found at <http://www.azdhs.gov/phs/immun/iapcoor1.htm>. The Vaccines for Children (VFC) Program serves children 0 through 18 years of age who are: enrolled in AHCCCS (Medicaid); or American Indian or Alaskan Native; children with no health insurance or children whose health insurance does not cover immunizations. These children can get immunizations at little or no cost from their health care provider (if the provider is enrolled in VFC) or from their local Health Department or Community Health Center.

In 2000, Arizona distributed 1.2 million doses of childhood vaccine at a cost of about \$24 million. As a result of new vaccines being required and the cost of some of these vaccines, in 2009 2.1 million doses were distributed at a cost of \$75 million. The state is also able to use 317 funding (federal) for public health clinics to be used for underinsured children. In 2009, this funding provided 102,000 doses (\$5.5 million).

ARRA (Stimulus funding) helped provide 42,000 doses (\$1.8 million) from September 2009 to August 2010. The Arizona Department of Health Services (ADHS) no longer receives state funding for vaccines. State Children Health Insurance Program (SCHIP) funds, for children on KidsCare, who are not eligible for Medicaid, were used to provide 22,000 doses (\$740,000) in 2009.

The Role of ADHS:

The ADHS Arizona Office of Immunization Program is working to raise immunization rates for all children and adults by:

- Providing vaccines for Medicaid eligible children, Native American children and uninsured or underinsured children in Arizona through the Vaccines for Children program.
- Supporting public immunization providers in order to enhance service delivery of Immunizations.
- Providing education about vaccine-preventable diseases, vaccines, and immunizations to healthcare providers and the public.
- Increasing awareness among health professionals of awareness on the importance of following recommended immunization schedules for age appropriate vaccinations.

Arizona Department of Health Services Arizona Immunization Program Office (AIPO)

The Arizona Immunization Program Office (AIPO) increases public awareness by providing educational materials to all vaccine providers through partnerships with coalitions, such as The Arizona Partnership for Immunization (TAPI), the Maricopa County Childhood Immunization Partnership (MCCHIP), the Arizona Partnership for Adult Immunizations (APAI) and the Southern Arizona Immunization Coalition (SAIC). Federal Title V funds have supported the work of TAPI for the past decade.

The AIPO program monitors immunization levels of Arizona's children attending school or child care; vaccine-preventable disease surveillance and outbreak control; healthcare provider and community immunization information and education; and enforcement of the state's immunization requirements. Immunizations required for child care and school entry are specified in R9-6 701 through 708. These requirements include adolescent immunizations, which are being implemented in a sequential manner each year: In the fall of 2011, Arizona children 11 years and older entering 6th, through 9th grades will be required to be vaccinated against meningococcal disease and pertussis prior to school entry if 5 years have passed since their last tetanus/diphtheria containing vaccination. This will not only serve to protect the child being immunized but also any infants who are too young to be vaccinated for pertussis. All healthcare professionals administering immunizations to children must report these immunizations to the Arizona State Immunization Information System (ASIS). The registry serves as a receptacle for accommodating the reported data and is a valuable tool for the management and reporting of immunization information to public health professionals, private and public healthcare providers, parents, guardians and other child care personnel. An effort is underway to develop automated interfaces between ASIS and electronic health records systems in provider's offices throughout the state.

Finally:

We must be ever-vigilant in making vaccine accessible; promoting vaccination among high risk populations; combating unwarranted vaccine safety concerns, such as concerns of autism after measles immunization; and educating parents, teachers, and childcare facility staff about the need for immunizations and staying on schedule so that children will be fully protected as early as possible.

To paraphrase the Arizona Republic and Will Humble, vaccines protect not only the individual who gets them but the entire community. With enough people vaccinated, a virus can't spread. They are part of our duty as members of a community, just as we have a duty not to drive while under the influence of drugs or alcohol.

2010 Recommended Childhood Immunization Schedule Birth – 6 Years

Vaccine ▼	Age ►	Birth	1 month	2 months	4 months	6 months	12 months	15 months	18 months	19–23 months	2–3 years	4–6 years
Hepatitis B ¹	HepB	HepB	HepB		HepB							
Rotavirus ²				RV	RV	RV ²						
Diphtheria, Tetanus, Pertussis ³				DTaP	DTaP	DTaP	<i>see footnote²</i>	DTaP				DTaP
<i>Haemophilus influenzae</i> type b ⁴				Hib	Hib	Hib ⁴	Hib					
Pneumococcal ⁵				PCV	PCV	PCV	PCV				PPSV	
Inactivated Poliovirus ⁶				IPV	IPV	IPV						
Influenza ⁷				Influenza (Yearly)								
Measles, Mumps, Rubella ⁸							MMR		<i>see footnote⁸</i>			MMR
Varicella ⁹							Varicella		<i>see footnote⁹</i>			Varicella
Hepatitis A ¹⁰							HepA (2 doses)				HepA Series	
Meningococcal ¹¹												MCV

Range of recommended ages for all children except certain high-risk groups

Range of recommended ages for certain high-risk groups