

# PERFORMANCE AUDIT



Office of the  
Washington  
State Auditor  
Pat McCarthy

## Common Barriers to Compliance with Student Immunization Requirements

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# Executive Summary

## Note to the reader

On May 1, 2020, the Office of the State Auditor revised this report to correct errors discovered after the report was issued. The changes made in this revision are shown in **Appendix H**.

## Background (page 8)

Vaccinating children improves public safety and Washington state law requires principals or someone they designate to collect proof of immunization or exemption before a child can attend school. **Exhibit 1** lists specific responsibilities regarding immunization compliance.

Without this proof, state law requires the child must be excluded from attending school. These school vaccination laws are part of an effort to reach a level of protection against disease often referred to as “herd immunity.” This term describes resistance to the spread of a contagious disease within a population that results from a sufficiently high proportion of individuals being immune to the disease, especially through vaccination. In an effort to improve public health, the state of Washington and public health experts have set a goal to reach 95 percent vaccination coverage, the point at which outbreaks are less likely to occur. However, the state has yet to reach this goal and is still experiencing outbreaks of vaccine-preventable diseases. To address recent outbreaks of measles, in 2019 the Legislature removed the personal/philosophical exemptions for the measles, mumps and rubella (MMR) vaccination.

## Washington does not know its true vaccination rate (page 13)

The Department of Health (DOH) database lacked immunization data or showed zero kindergarten enrollment for schools in 29 out of 295 school districts in the audited school year, 2017-2018. For the purposes of this audit, we limited schools in these 295 school districts to traditional K-12 or “common school” settings and did not include private, charter, tribal or any other school types found in the state.

## Exhibit 1 – Responsibilities for immunization compliance

**Parent/Guardian** must comply with immunization regulations

**Healthcare providers** must administer vaccines according to the Recommended Immunization Schedules

**School administrators** must check for compliance and exclude non-compliant students

**School nurses and staff** must:

- Collect, assess and submit immunization information
- Communicate with parents/guardians and follow up as needed

**Local health jurisdictions** may administer vaccines, prevent, investigate and contain disease outbreaks

**Department of Health** must:

- Monitor state levels of immunization
- Review annual status reports
- Act as a resource for immunization information
- Draft rules

**State Board of Health** must adopt rules to establish requirements for full immunization

**Office of Superintendent of Public Instruction** must:

- Develop regulations for record verification and student exclusion
- Consult with school districts on immunization issues
- Inform schools about immunizations in collaboration with DOH

Source: 2018 DOH Immunization Manual For Schools, Preschools, and Child Care Centers.

Of the schools whose data was included in the database, DOH data showed that 8 percent of all kindergarteners lacked complete immunization or exemption records. But because of the number of districts and schools whose data was not included in the database, the actual percentage of kindergarteners lacking records statewide may be greater. Without complete and accurate information about children's immunity status, officials may not be able to protect students and others should an outbreak of disease occur.

### **Some principals chose not to exclude out-of-compliance students from school, despite legal requirements to do so (page 15)**

State law makes school principals or someone they designate responsible for obtaining immunization documentation from their students. It also requires principals to exclude students from attending school when their parents fail to provide one of the acceptable proofs of immunity. School principals in the four low-compliance audited school districts chose not to exclude students who were out of compliance. District and school staff offered several reasons for not excluding students who were out of compliance. Interviewees from some districts said they would rather educate students than exclude them, and that by keeping students in school, they had a better chance at working with the parents or legal guardians and bringing them into compliance. Because no state agency is legally required to provide oversight of students' compliance with immunization requirements, this responsibility devolves to school districts.

### **Schools that actively engaged parents have higher document compliance rates (page 17)**

School districts with higher compliance rates employed an array of tools to improve their rates:

- Told parents exclusion is a legal requirement
- Made greater efforts to reach and communicate with the district's population
- Communicated immunization requirements to parents well before the new school year started and continued year round
- Sent parents frequent reminders about their child's missing immunization records
- Gave parents complete information about how they can ensure their child complies with immunization requirements, including information about exemptions

## **Schools that actively monitored and reviewed students' progress also saw greater compliance with both documents and vaccination** (page 21)

School districts that had higher compliance rates developed and reviewed internal reports on immunization records, and kept administrators focused on the topic. They also developed other tools to track and monitor student progress on vaccinations, and used a calendar devoted to vaccination outreach efforts. We found schools achieved better compliance outcomes if they assigned staff specifically to the task of monitoring student immunization records, and gave them clear guidance around their responsibilities.

## **Schools with lower compliance rates generally did not use these strategies to the same degree**

(page 23)

Some parents were unaware of immunization document requirements. School districts with lower compliance outcomes gave parents incomplete information, conducted infrequent or insufficient follow-up on conditional-status students, did not adequately train school staff, and had an insufficient number of school or district staff to complete immunization compliance duties.

## **School districts must find their own way forward to hold school principals accountable** (page 24)

Washington state law leaves school boards and district officials to sort out matters of oversight and enforcement themselves. Because the law does not provide an oversight agency, oversight by district and school administrators is particularly important. In the absence of oversight, we found some school principals use their own discretion to decide whether or not to exclude out-of-compliance students.

## Schools and districts can help parents overcome some of the barriers they face in having their children vaccinated (page 25)

School districts reported a variety of barriers to vaccination. These issues included limited access to vaccination resources, parents who choose not to vaccinate their children or vaccinate on a delayed schedule, and language barriers that contribute to poor understanding of immunization requirements. Schools are not the cause of these barriers, but in several areas, staff reported being able to help parents overcome barriers and to positively influence vaccination outcomes.

## State Auditor's Conclusions (page 27)

Because of widespread vaccination efforts, outbreaks of preventable diseases used to be rare in this country. However, as vaccination rates have fallen in certain areas, outbreaks have become more frequent. Washington experienced a significant measles outbreak in 2019, prompting the state Legislature to reduce the options for obtaining an exemption for receiving the measles, mumps and rubella vaccine.

To help limit outbreaks of preventable diseases, Washington has set a public policy goal of a 95 percent immunization rate. This is a level of protection against disease often referred to as “herd immunity.” Schools play an essential role in this process. In fact, existing state law is clear: Schools must collect proof of immunization or a valid exemption for every student on or before the first day of school. Without these records, schools are not supposed to allow students to attend school.

The immunization data collected by the Washington Department of Health (DOH) shows not all schools in the state are following the law, nor are they collecting these records consistently. Because of this, the state's true immunization rate is not known. That is both bad and easy to fix.

This audit shows that several school districts in Washington have succeeded in complying with state law regarding immunization records, and therefore taken steps to ensure herd immunity. Their practices are clear, effective and simple: clearly communicate the rules to parents, pay attention to whether they comply, and enforce the law when necessary. Additionally, DOH offers a robust set of materials to assist schools in this area.

The intent of the law is to ensure herd immunity, not perfect paperwork collection. But it is impossible to know where the state stands on its public health goal without compliance with immunization record-keeping. In addition to the difficulty some districts have with immunization records, there are other districts that aren't included in the immunization data compiled by DOH.

Right now, the burden of ensuring school administrators comply with the law rests with superintendents and elected school boards. However, if schools, school districts and local leaders do not make immunization compliance a priority, state leaders might consider enacting a statewide accountability system to enforce the rules and help meet the goal of herd immunity.

## Recommendations (page 28)

We consider the audit results so broadly applicable that it is in the state's best interest for every school district to undertake any relevant and repeatable good practices reported by districts that participated directly in the audit. These practices are found throughout the report and summarized in **Appendix C** of this report.

- Districts and schools should help ensure parents are aware of legal requirements related to vaccination documentation, all of the ways to comply with those laws, and the consequences of noncompliance
- Districts and schools should provide materials about compliance and the benefits and risks of vaccinations in languages other than English when appropriate
- Districts and schools should ensure staff understand their roles and responsibilities related to immunization compliance and monitoring
- Schools should exclude students who are out of compliance as is required by the law and districts should hold schools accountable for following the law

## Next steps

Our performance audits of state programs and services are reviewed by the Joint Legislative Audit and Review Committee (JLARC) and/or by other legislative committees whose members wish to consider findings and recommendations on specific topics. Representatives of the Office of the State Auditor will review this audit with JLARC's Initiative 900 Subcommittee in Olympia. The public will have the opportunity to comment at this hearing. Please check the JLARC website for the exact date, time, and location ([www.leg.wa.gov/JLARC](http://www.leg.wa.gov/JLARC)). The Office conducts periodic follow-up evaluations to assess the status of recommendations and may conduct follow-up audits at its discretion. See **Appendix A**, which addresses the I-900 areas covered in the audit. **Appendix B** contains information about our methodology.

# Background

## Vaccinating children improves public safety

Vaccinating children is an important public safety measure because doing so helps prevent the spread of infectious diseases. According to the World Health Organization, the use of vaccinations prevents two to three million deaths a year worldwide. Vaccinations also protect people in the community who cannot be vaccinated, including babies too young for vaccination, pregnant women, and those with compromised immune systems. These people rely on “herd immunity,” in which a mostly immunized population provides a measure of protection for those without immunity.

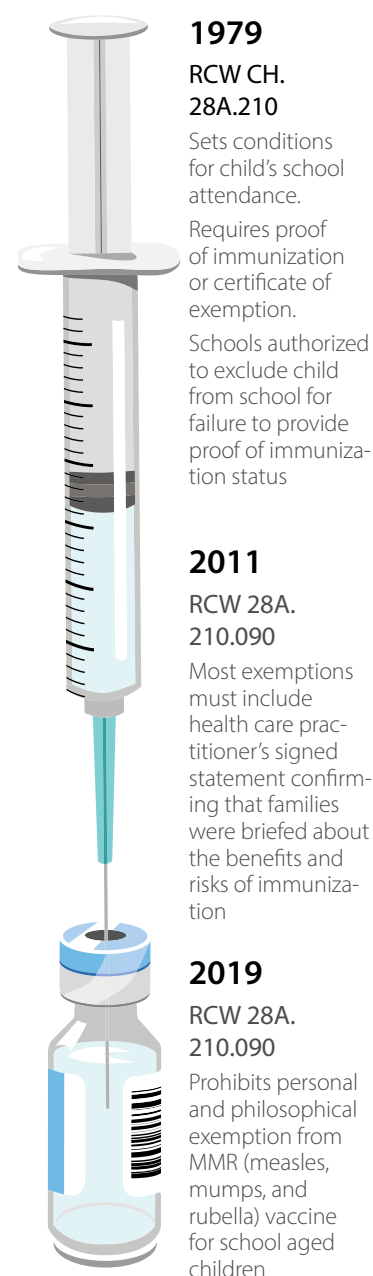
Before effective vaccines became widely available, outbreaks of highly contagious diseases, including polio, whooping cough (pertussis), measles, rubella (also known as German measles), and mumps were common in school-age children. Even today, the traditional school setting – many children sitting, eating and playing in close proximity – increases the probability of contracting and transmitting diseases that can be prevented through vaccination.

This means schools play a critical role in the effort to protect the public from vaccine-preventable diseases. Each state adopts its own rules concerning immunization as a condition for attending school; Exhibit 2 shows a timeline of laws in Washington. The Washington State Board of Health’s immunization rules for school and child care facilities require children to be immunized against 11 vaccine-preventable diseases (see Appendix D).

## State law requires principals or someone they designate to collect proof of immunization or exemption before a child can attend school

Washington law (RCW 28A.210.080 and RCW 28A.210.110) requires school administrators (principals or someone they designate) to collect proof of immunization or a valid exemption for every student on or before a student’s first day of school. This is usually done upon entering kindergarten, but it also applies to a child transferring in from another school district, state or country. State law allows schools to accept a Certificate of Immunization Status or a Certificate of Exemption. These documents might also be accompanied by titer test results or a schedule of immunization depending on a particular situation. Without any proof

### Exhibit 2 – Timeline of immunization laws in Washington





of the child's immunity from the full list of 11 vaccine-preventable diseases, parents must work with the school to establish a plan and schedule to obtain missing vaccinations, a certified exemption or a titer test. Exhibit 3 lists the documents that demonstrate a child has met state immunization requirements.

### Exhibit 3 – Acceptable documents to show a child's immunization status

*Issued by Washington Department of Health for fiscal year July 1, 2019 – June 30, 2020*

Type of document	What it shows
Certificate of Immunization Status (CIS)	Shows which required vaccinations a student has received; may also include attestation the child has had chickenpox (Varicella)
Titer test results (a laboratory blood test that checks for antibodies that confirm the likely immunity to a certain virus)	Positive titer results demonstrate immunity level against one or more diseases. A copy of the test results must be provided. Note that not all vaccine preventable diseases have a titer available.
Certificate of Exemption (COE)	Parents have chosen to exempt the student from one or more vaccines for medical, personal/philosophical or religious reasons
Schedule of immunization	Outlines the student's plan and schedule to get the vaccinations required to attend school

Source: Auditor prepared based on WAC 246-105-050, WAC 932-380-020 and information on the CIS form and the COE forms.

Once these documents are collected, schools must report the immunization status of all students to the Department of Health (DOH) by November 1 each year. Depending on the records provided, schools place a student's immunization compliance status in one of four categories:

**Complete for all immunizations** – The student has received all required vaccines or provided proof of acquired immunity. The child may attend school from the first day of class, with no further documentation until boosters are required, usually at the start of 6th grade.

**Exempt** – The student has neither received required vaccines nor demonstrated acquired immunity, but their parents have obtained one of the permitted forms of exemption. The child may attend school from the first day of class.

**Conditional** – The student has not demonstrated immunity to some or all the diseases required by law and lacks a valid exemption. The child may attend school on the condition the family makes satisfactory progress toward full immunization as outlined in a submitted immunization schedule. This status is temporary: the student must start or continue to get all required vaccinations within 30 days, or obtain a certificate of exemption, otherwise the conditional status expires.

**Out-of-compliance** – The student’s parents have not submitted the documents listed in Exhibit 3 for some or all required vaccines. These students are considered out of compliance with state law.

Vaccine exemptions are legal in Washington, as they are in many other states: they allow parents to opt out of vaccinating their child against certain diseases. All states permit medical exemptions, for example for children with compromised immune systems; 45 states and Washington, D.C., grant religious exemptions. Washington is among those that also grant exemptions for personal/philosophical or religious reasons. However, in 2019, after this audit had already begun, the Legislature passed a law removing the personal/philosophical exemptions for the measles, mumps and rubella (MMR) vaccination in an effort to mitigate the health risks posed to the public by the growing number of unvaccinated children.

### **Without proof of immunization or exemption, state law says the child must be excluded from school**

State law makes school principals or someone they designate responsible for obtaining proof of immunity or exemption from all students, and for then reporting the status of their students to DOH. State Board of Health immunization rules also require them to maintain a list of students with an exemption or missing doses to use in the event of a disease outbreak. In addition, DOH encourages schools to identify students who are missing required immunizations and contact parents for follow-up.

Because no state agency is legally required to provide oversight of students’ compliance with immunization requirements, this responsibility devolves to school districts. According to RCW 28A.210.120, principals must exclude students from attending school when their parents fail to provide one of the acceptable proofs of immunity or exemption.

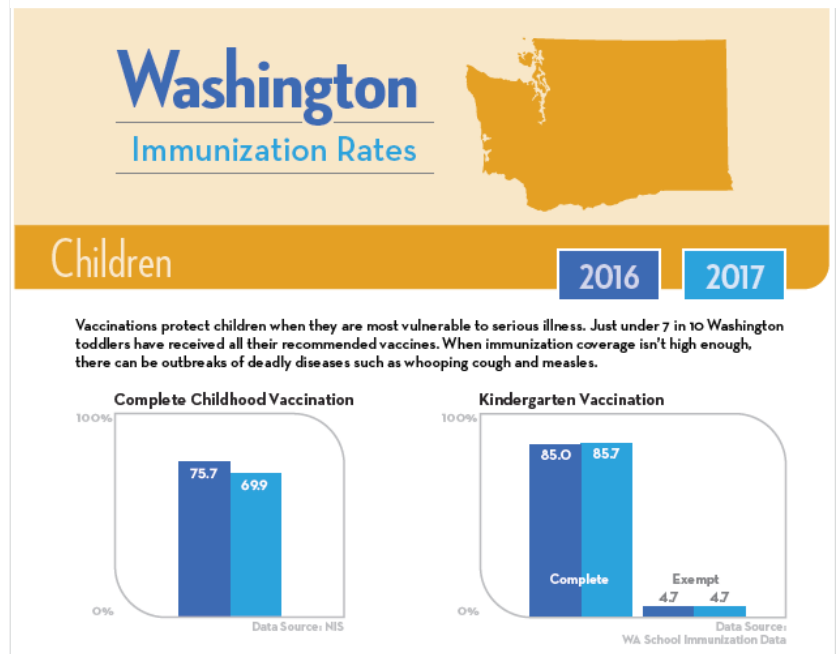
### **Washington has not reached its goal of 95 percent vaccination levels and is still experiencing outbreaks of vaccine-preventable diseases**

The World Health Organization has determined that achieving vaccination levels at 95 percent, which is considered full immunization, can protect those who cannot be vaccinated by preventing or minimizing outbreaks that pose a public safety risk. A federal program (Healthy People 2020) seeks to meet this rate nationally for most of the 11 vaccine-preventable diseases listed in Appendix D by 2020. In Washington, the state and public health experts have set a goal to have vaccination

levels in the state at 95 percent, too. The most recent DOH figures (for 2017, illustrated in Exhibit 4) suggest the state still has a considerable gap to close as only about 85 percent of kindergartners have documentation to show they have completed the full schedule of doses for the 11 vaccine-preventable diseases.

In the first five months of 2019, state health officials confirmed 71 cases of measles in Clark County. Of the 71 cases, 66 were in children and 61 cases were in people who had not been vaccinated. (There is additional, school district-level information on vaccination rates in Appendix E.) In response, Governor Jay Inslee declared a statewide state of emergency in all counties. By the time Clark County's outbreak was under control, the county and the state together had spent more than \$1 million in public funds to manage the epidemic. This measles outbreak occurred 19 years after it was announced that measles had been eliminated in the United States.

#### Exhibit 4 – Washington's immunization rates for children are still not meeting the 95% goal



Source: <https://www.doh.wa.gov/Portals/1/Documents/Pubs/348-709-WashingtonImmunizationScorecard.pdf>

## Audit objectives

This audit answers the following questions:

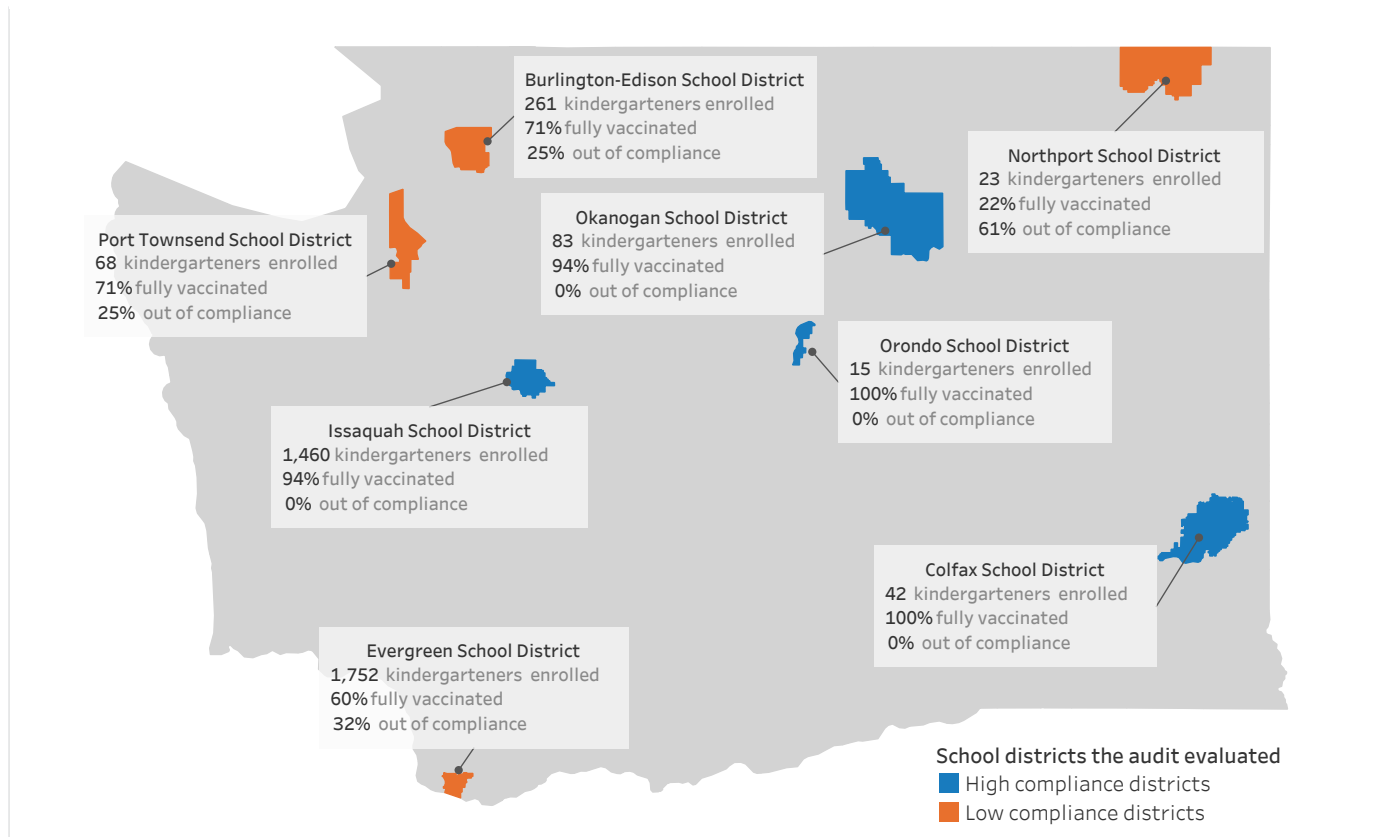
1. Why are noncompliance rates for student immunizations high for some school districts?
2. What are common barriers to families vaccinating their children, and how can school districts help minimize them?

To address the many complexities we found in answering question 1, the report breaks the answer into topic areas related to:

- True vaccination rates in Washington
- The choice some principals make not to exclude out-of-compliance students
- How schools with high compliance rates achieved their rates
- What schools with lower compliance rates need to improve
- Who should hold school principals accountable

To answer these questions, we used 2017-2018 student immunization data collected by DOH to select eight school districts of varying sizes and levels of compliance with state immunization documentation requirements. The eight districts are shown in the map in Exhibit 5. We did not include private, charter, tribal or other school types in our data or analysis.

### Exhibit 5 – Four high-compliance and four low-compliance school districts in this audit



Note: The audit included Evergreen School District in Clark County, which should not be confused with the district of the same name in Stevens County.

Source: Auditor prepared based on self-reported data found in the 2017-2018 DOH kindergarten student immunization status report.

This audit focused on kindergarteners because this grade is most childrens' primary point of entry to the public school system. It is also the grade in which students are required to have most of their vaccines. We interviewed school administrators and student health professionals in the eight districts to find out how they achieved their documentation compliance rates, and what they did to improve the percentage of students submitting all vaccination records within the state's timeframe. During the interviews, we requested documentation to corroborate the claims made in their interviews. We then compared the actions of high- and low-compliance districts to understand what specifically contributed to the success of high-compliance districts. We also asked each district about local barriers to vaccination and possible ways schools can address them.

Appendix B has more information on how we selected the school districts to audit.

# Audit Results

## Why are noncompliance rates for student immunizations high for some school districts?

### Answer in brief

Washington does not know its true vaccination rate for two key reasons. First, the Department of Health's (DOH) database lacks immunization data for public schools in several school districts for the 2017-18 school year. Second, 8 percent of all kindergarteners in public schools whose data is included in the DOH database lacked complete immunization or exemption documentation.

Some principals chose not to exclude out-of-compliance students from school, despite legal requirements they do so. School principals in the four districts with low compliance rates all chose not to exclude students. District and school staff offered several reasons for not excluding students who are out of compliance.

Schools that actively engaged parents have higher document compliance rates. In addition, schools that actively monitored and reviewed students' progress also saw greater compliance with records and with vaccination. Schools with lower compliance rates generally did not use these strategies to the same degree. Lacking a state agency charged with oversight, school districts must find their own way forward to hold school principals accountable for meeting state requirements.

## Washington does not know its true vaccination rate

If students do not submit their immunization documentation, education professionals and health officials do not know which students are fully, partially or not immunized. In case of an outbreak, officials may not be able to protect students and others from getting infected. Inaccurate data could lead to higher rates of infection, higher costs associated with responding to the outbreak, and an extended disruption of school services.

The collection, analysis and reporting of school immunization status data by DOH is the primary resource for state and local health authorities to assess how many students are being vaccinated. However, DOH's data itself lacks immunization data for 29 school districts. In addition, despite the central processing of student records at DOH, no state agency verifies data accuracy. Furthermore, if schools do not report data accurately, there is no process to provide corrections.

When a district’s data is unavailable for analysis, there is no way to identify vaccination rates or to identify if students are out of compliance. And if students are out of compliance, their true immunization status is unknown.

### The Department of Health’s database includes public school immunization data for most school districts but not all

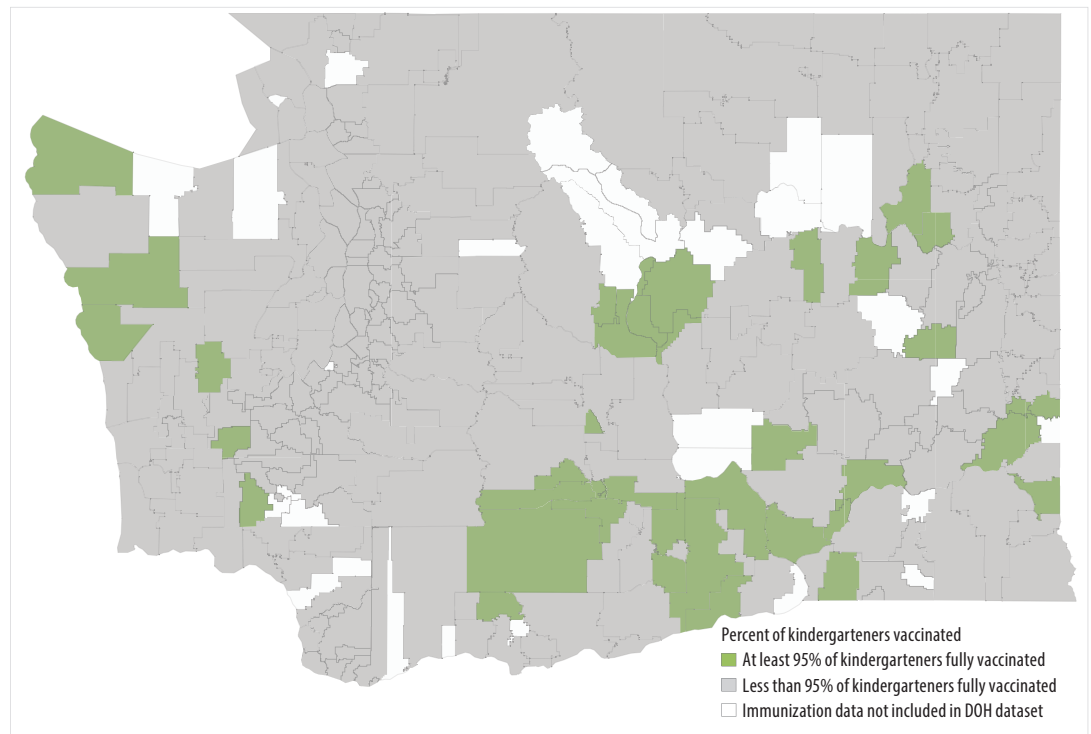
Ninety percent of Washington’s 295 school districts (266 districts) have their student immunization data for kindergarteners for the 2017-2018 school year included in the database. The remaining 29 districts either lacked records in the database or were shown as having no kindergarten students. However, student enrollment data from the Office of Superintendent of Public Instruction shows that the majority of these districts do in fact have kindergarteners enrolled. Although we did not look into the reasons why the DOH database lacked data for these districts, incomplete data impedes the state’s ability to fully understand the completeness of its vaccination efforts. This understanding is critical, especially when assessing the risk and impacts of potential disease outbreaks in school districts and schools.

For the purposes of this audit, we limited schools in these 295 school districts to traditional K-12 or “common school” settings and did not include private, charter, tribal or any other school types found in the state.

For example, to achieve herd immunity for measles, at least 90 percent to 95 percent of the population must be immune. A disease like polio is less contagious: herd immunity requires between about 80 percent and 85 percent of the population to be vaccinated. Although polio’s threshold is lower, it is still a very high proportion, especially given that some people cannot be vaccinated for medical reasons. A closer

review of the reported public school data revealed that only 40 (about 14 percent) school districts reported kindergarten immunization rates of 95 percent or more. These districts are marked in green in the Exhibit 6 map, which shows reported kindergarten immunization rates statewide at the district level. Twenty-nine school districts, marked in white, do not have their data in the DOH database or are shown there as having zero kindergarten students.

**Exhibit 6 – Most school districts reported kindergarten immunization rates lower than 95 percent during the 2017-2018 school year**



Source: Auditor prepared based on self-reported data found in the 2017-2018 DOH kindergarten student immunization status report.

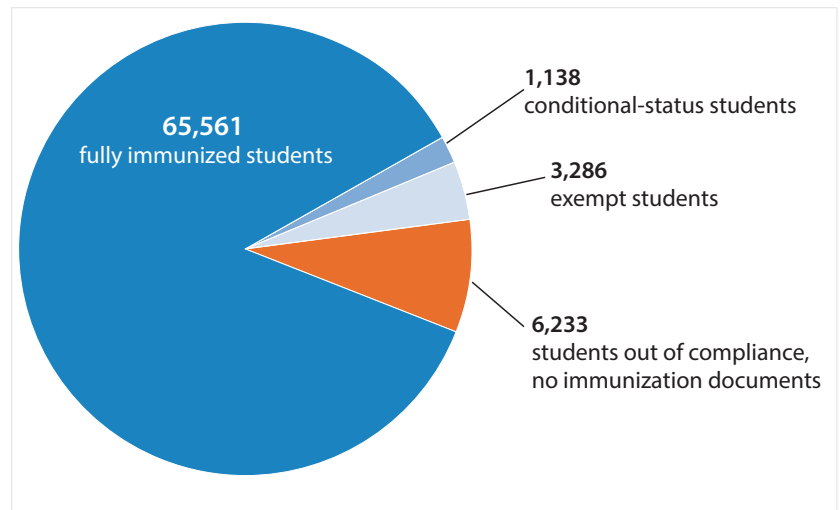
## Eight percent of all kindergarteners in public schools included in the DOH database in 2017-2018 school year lacked complete immunization or exemption documents

During the 2017-2018 school year, around 6,200 (8 percent) kindergarteners in the public schools whose data is included in the DOH database were out of compliance with state requirements for immunization documents. As Exhibit 7 shows, this group forms a significant gap in the state’s target of 95 percent of kindergarteners to be fully immunized.

The 8 percent of kindergarteners without documents, either of vaccination, immunity or exemption, pose a greater risk, because the state does not know whether they have immunity against the 11 vaccine-preventable diseases or not. Appendix F contains additional information about total vaccination rates, including private school rates.

### Exhibit 7 – Immunization documents are lacking for more than 6,000 Washington students

2017-2018 school-reported data



Source: Auditor prepared based on self-reported data found in the 2017-2018 DOH kindergarten student immunization status report.

## Some principals chose not to exclude out-of-compliance students from school, despite legal requirements to do so

The state gives school administrators and principals one primary tool to compel families to ensure their children come to school with up-to-date immunization documents or exemptions: They can bar the student from in-school attendance. Exclusion is in fact mandatory in state law if parents do not submit documentation of immunization status for their student on or before the first day of attendance. Further, State Board of Health immunization rules require students to be excluded if they fail to make progress towards compliance after 30 days by obtaining either the required vaccinations or an appropriate exemption. But some staff in districts with high rates of out-of-compliance students told us they felt other considerations outweighed the requirement they exclude children with incomplete immunization documents.

## School principals in the four districts with low compliance rates chose not to exclude students

Despite state law and their own school district’s policies or procedures mandating they exclude students that lack immunization records from school, district and school staff in the four low-compliance districts told us they nonetheless allowed students to continue attending school. The districts, their total kindergarten enrollment, the percentage of fully vaccinated students, and the percentage of out-of-compliance students are shown in **Exhibit 8**. None of these school districts excluded any out-of-compliance students in the 2017-2018 school year.

**Exhibit 8 – Four school districts with high rates of out-of-compliance students**  
 2017-2018 school reported data

School district	Total public kindergarten enrollment	Fully vaccinated students	Out-of-compliance students
Burlington-Edison	261	71%	25%
Port Townsend	68	71%	25%
Evergreen (Clark County)	1,752	60%	32%
Northport	23	22%	61%

Source: Auditor prepared based on self-reported data found in the 2017-2018 DOH kindergarten student immunization status report.

## District and school staff offered several reasons for not excluding students who are out of compliance

District and school staff offered these reasons for not excluding students who lack proof of immunization or exemption.

- **Excluding students from school would result in parents taking their children out of school.** Superintendents in Northport and Port Townsend school districts told us excluding children from school for being out of compliance would not result in children getting vaccinated but instead result in parents not sending students to school at all. A principal in Evergreen school district said that large numbers of families may choose to hold children out of school instead of complying with requirements.
- **Excluding students from school is contrary to the schools’ purpose to provide an education to students.** One official at the Burlington-Edison school district said that if children were sent home because they lack immunization paperwork, they would “miss out” on their education. He believed such a practice would be unfair to the student because it was not the student’s fault. District staff at Evergreen school district indicated that providing educational services was their top priority.



- **Excluding students from attending school places a burden on school staff.** Officials at Evergreen school district said its schools did not have enough staff to enforce immunization compliance requirements. Similarly, district administrators at Burlington-Edison district said they would need to hire additional teachers to provide educational resources for excluded students learning at home.
- **Excluding students from school may reduce school funding.** District staff at Burlington-Edison school district said that excluding students from school would affect school funding. To verify this, we spoke to officials at the Office of the Superintendent of Public Instruction (OSPI), which consults with schools on immunization issues. OSPI confirmed that school finance rules are based on the number of students enrolled in and attending school.

## Schools that actively engaged parents have higher compliance rates

While all eight audited districts told parents that they had to submit student immunization records to attend school – usually in kindergarten registration information on their websites – those schools that most actively explained the how and why of vaccinating children and compliance with immunization requirements achieved higher rates of compliance with documentation.

The four high-compliance school districts, shown in **Exhibit 9**, told parents about all the options available to them, from vaccination to exemption. Furthermore, they communicated the options to parents early and often in the run-up to kindergarten. Three of the four school districts also told parents that, if they did not receive immunization or exemption records within the 30-day conditional admission window, they could and would exclude the child from the classroom until the records were received.

**Exhibit 9 – Four school districts with high rates of compliant students**  
2017-2018 school reported data

School district	Total public kindergarten enrollment	Fully vaccinated students	Out-of-compliance students
Colfax	42	100%	0%
Issaquah	1,460	94%	0%
Okanogan	83	94%	0%
Orondo	15	100%	0%

Source: Auditor prepared based on self-reported data found in the 2017-2018 DOH kindergarten student immunization status report.

The audit asked high-compliance districts to share the practices they felt brought them success in gathering all required documents from parents of their students. The most frequently cited strategies, discussed in this section of the report, focused on a high level of engagement and communication between school and parents. These schools also often achieved the state's true goal in immunization record-keeping: helping see to it that more children receive vaccinations at an early age and on the most effective schedule. Appendix C lists additional practices for engaging parents and increasing immunization documentation compliance.

### **Start with the bottom line: Tell parents exclusion is a legal requirement**

Principals that were prepared to exclude students who did not submit all required vaccination or exemption documents achieved higher compliance – and higher vaccination rates – than those that did not. Of the eight districts we evaluated, those that communicated about compliance requirements as a matter of law had better compliance rates. According to a district administrator in the Issaquah school district, the district achieved its highest levels of success when staff began telling both parents and principals that they would be “following the law” when it came to excluding students that lacked complete immunization documents. By framing compliance with record-keeping as a matter of legality, it “took away a lot of the added pressure from parents opposing immunization while building support among school staff.”

One exception was the Colfax school district. The district achieved high compliance rates, but unlike the other high-compliance districts, it does not exclude students. It is important to note that Colfax did use most of the other practices we highlight in this section.

Some districts that did not exclude noncompliant students in 2017-2018 school year said they had plans to begin enforcing exclusions. While currently not excluding students, three of the audited low compliance school districts – Port Townsend, Evergreen and Northport – said they would begin excluding students during the 2019-2020 school year.

### **Speak their language: Use tools and languages that reach the district's population**

School districts with high compliance rates used multiple methods to tell parents about immunization requirements. Two smaller districts suggested in-person and one-to-one techniques worked best. Orondo staff talked to or telephoned parents directly, while Okanogan sent staff to local preschools ahead of the upcoming school year to meet with parents and discuss immunization requirements for kindergarten students. Okanogan also put out a sandwich board on the main street, and bought ads in the local newspaper and radio. In Issaquah, a much larger district, staff said online communications were effective.

Districts with higher compliance rates found ways to communicate immunization requirements in other languages as needed. For example, Orondo school district – which has a large Latino population – emphasized the fact that it had both bilingual and bicultural staff that speak Spanish and understood cultural issues that might be barriers to vaccination.

On its website, Issaquah school district provides a list of immunization requirements in four languages: English, Chinese, Korean, and Spanish. It also

posts a link to a guide “Plain Talk about Childhood Immunizations” developed by DOH. Besides this guide, school staff responsible for students’ immunization compliance can also use other immunization materials developed by the DOH and posted on its website.

The compliance and vaccination resources for schools and districts include a variety of materials, including immunization legal requirements, samples of letters to be sent to parents and informational materials. They are listed in Appendix G, while Exhibit 10 illustrates just some of the materials available in languages commonly spoken in Washington.

### Exhibit 10 – Example of immunization materials provided in different languages through DOH



Source: <https://www.doh.wa.gov/Portals/1/Documents/8200/348-080-PlainTalk-en-L.pdf>

### Tell them early and often: Start well before the new school year starts and continue year round

Districts with high compliance rates opened the conversation about immunization requirements well before the fall start of school, usually in the preceding winter or early spring. These districts held early kindergarten registration events where staff, often the school nurse, could tell parents about the immunization compliance requirements. An important part of the message is that immunization records must be submitted to the school in order for their child to attend.

These districts did not limit their communications with families to one conversation or a single flyer. Throughout the year, Orondo school district made the effort to communicate directly with families, by telephone calls as well as official letters, to assess compliance issues and identify how the school could help. The district’s weekly newsletter periodically includes information about immunization requirements.

## **Don't hesitate to follow up: Send frequent reminders to parents about their child's missing immunization records**

Successful districts treated compliance with record-keeping as an ongoing opportunity to encourage vaccination and bring all students into compliance with immunization requirements. Schools and districts that sent frequent reminders to parents whose children were in “conditional” status, that is lacking an exemption or proof of immunity, were more successful at receiving documents within the required window.

For example, Okanogan attributes its high compliance rates to frequent follow-up with parents of students in conditional status to ensure they are making satisfactory progress toward full immunization as outlined in a submitted immunization schedule. The district begins by sending parents of students with missing documents a letter explaining immunization compliance laws and giving them seven business days to respond. District staff said when parents understand all of their options, it is easy for them to choose one and act on it promptly. Because this district is small, staff know most of the families personally, and often telephone them directly to discuss next steps. A large district, Issaquah, provides extensive information regarding immunization requirements and resources on its website and sends families an e-newsletter through a subscription service.

## **Tell them all their options: Choosing an exemption or providing results of a titer test**

One of the ways to comply with immunization requirements is to obtain an exemption. Districts with high documentation compliance rates told parents that they can choose to obtain a personal/philosophical, religious or medical exemption as an alternative to some of the vaccinations for their child. All four audited districts with high compliance rates told parents about all the exemption options. Colfax officials said some parents appear to simply disregard immunization requirements. In response, the district lets them know they have two options: Go to the doctor to get an exemption for personal or medical reasons, or go to the doctor and get vaccinated. This reminds parents that a doctor's signature is legally required for personal/philosophical and most religious exemptions as well as medical exemptions.

Another way to comply with immunization requirements is to provide results of a titer test – blood test that shows positive immunity to a certain disease. The option to prove immunity through a titer test is communicated by districts to parents by being listed on the Certificate of Immunization form that all schools provide and all parents must fill out. However, two districts with high document-compliance rates make an extra effort to bring this to parents' attention. Okanogan school district explicitly talks about the titer test on its website and Issaquah school district tells parents about how to prove immunity through a titer test if they cannot access their medical records.

## Schools that actively monitored and reviewed students' progress also saw greater compliance with both documents and vaccination

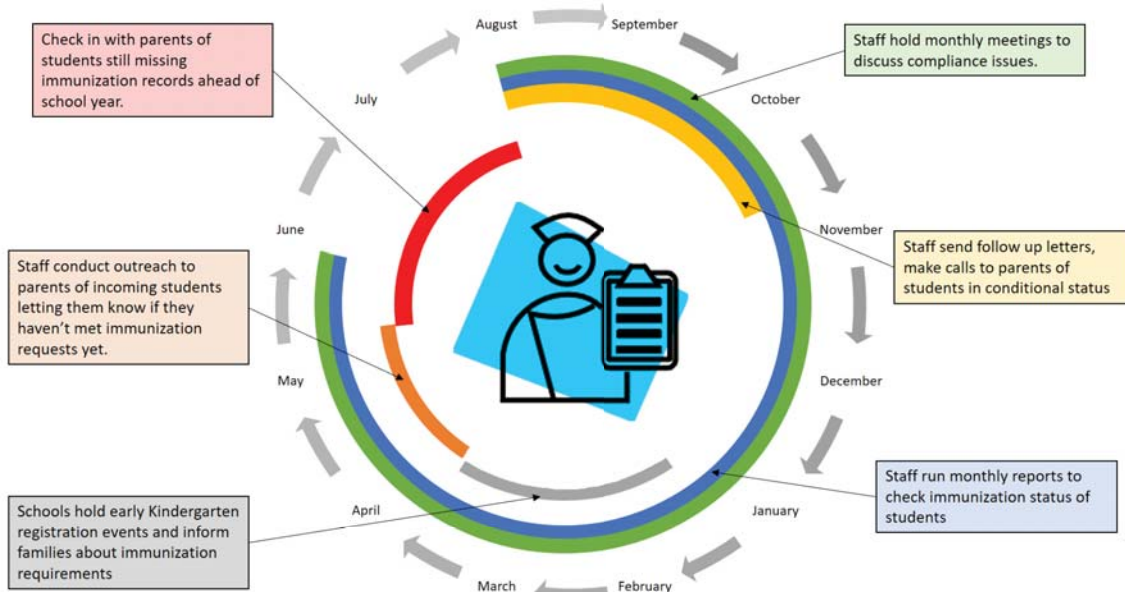
Districts with high rates of compliance with vaccination documents (Colfax, Issaquah, Orondo, and Okanogan school districts) supplemented their engagement with parents by doing more to review and monitor vaccinations. Their practices fell broadly into three general areas.

**Develop and review internal reports on immunization records.** Districts that ran monthly student immunization compliance reports generally saw more students meeting state requirements. For example, Issaquah runs monthly reports from a program called Skyward (a common student information system which contains immunization data), and uses them to help school staff identify students who are not in compliance or at risk of falling out of compliance.

**Keep administrators focused on the topic.** School nurses in Issaquah participate in monthly staff meetings where they report on students' immunization status to the district's Health Services Supervisor. The agenda of the Orondo school district's weekly principals' meeting includes a regular slot to discuss any immunization compliance issues when they arise.

**Develop and use a calendar devoted to vaccination outreach efforts.** Orondo elementary school staff have effectively developed a year-round calendar that helps them make sure parents understand immunization requirements in a timely way. (A similar calendar is illustrated in Exhibit 11.)

**Exhibit 11 – School immunization compliance monitoring is a year-round process**



Source: Auditor developed using information gathered from high-compliance district interviews.

Beginning in April, staff create a roster of all incoming kindergarten students for the next school year to identify those missing vaccinations. They later use it to track the immunization status of students in conditional status. Specifically, in May, staff call or write parents whose children are missing vaccinations, to prompt them to review the child's vaccination schedule with their healthcare provider. Staff follow up with parents again in mid-June. Then, close to the beginning of the school year, staff telephone parents whose children are still missing vaccinations or other proof of compliance.

## **Schools with assigned staff that have clear responsibilities achieved better compliance outcomes**

School districts with high compliance rates attributed their success to dedicated and trained employees. A dedicated employee with a clear understanding of the role and the time to work on compliance issues was more likely to be able to help students meet immunization requirements. That dedicated employee can be a nurse, a records clerk or an immunizations compliance clerk. The benefit to having a nurse on staff is that the school can then be granted access to the Washington State Immunization Information System, and delegate access to non-licensed healthcare provider staff.

Four school districts – Orondo, Issaquah, Okanogan and Colfax – had employees with specific compliance responsibilities, such as gathering and entering data, working with parents to get vaccinations up-to-date, or verifying the accuracy of the documents. Most of these districts emphasized that the key to their success was having staff who built trusting, individualized relationships with parents to communicate immunization requirements and issues.

Schools reported that having full-time nursing staff who clearly understand their responsibilities in improving immunization compliance contribute to improved compliance rates. Issaquah school district – which had a total enrollment of more than 20,500 students– employs 22 school nurses and 24 health room assistants. Nursing staff understand it is their role to inform parents of immunization requirements and follow up with parents of students with missing documents. Colfax's district administrator also acknowledged that having full-time nursing staff has been the main reason for the district's successful outcomes. Nurses there even help connect parents with doctors and help them make appointments to get vaccinations for their children.

## Schools with lower compliance rates generally did not use these strategies to the same degree

School districts and schools with low compliance rates (Burlington-Edison, Evergreen, Northport and Port Townsend districts) generally did not apply as many different strategies to encourage parents to complete vaccination requirements and turn in immunization records required at the start of kindergarten.

**Incomplete information to parents** – Some low-compliance school districts unintentionally gave parents incomplete information about immunization requirements, leaving out vital information about exclusion and exemptions. Not providing complete information about immunization requirements reduces families' understanding of these requirements.

For example, Northport only referred to student exclusion from school in the case of an outbreak – not as a legal response to a student lacking immunization documents. Evergreen and Northport school districts mentioned medical and religious exemptions in their communications to parents but did not always include personal/philosophical exemptions among the options. A nurse at Burlington-Edison said the district does not discuss exemption options with parents because it requires a doctor's signature if the exemption is for personal/philosophical reasons. The staff do not tell parents about Certificate of Exemption for religious reasons either.

**Infrequent or insufficient follow-up on conditional status students** – These schools focused their student immunization compliance efforts primarily at the beginning of each school year. They followed up less frequently with parents of students in conditional status or who otherwise lacked immunization documents.

Not following up with students in conditional status or those who lack immunization documents allows them to remain out of compliance and misses opportunities to bring students into compliance. When surveying all parents of out-of-compliance students, Evergreen school district learned that the primary reason children were not up-to-date with school immunization requirements was that parents thought their children were up to date or had an exemption, and were surprised to receive a letter telling them they were out of compliance.

**Inadequately trained and insufficient number of school staff** – Staff in some low-compliance districts said they did not fully understand how to pursue immunization compliance tasks. At Northport, for example, district officials emphasized the importance of ensuring nurses were qualified and knowledgeable about immunization requirements. However, the employees tasked with the role said they felt "a little lost" in tackling immunization compliance issues. Officials cited that another barrier to achieving higher compliance rates was the nurse's time devoted to the school: the Northport nurse worked only one day a week in each of five school districts.

Evergreen school district also said schools in the district are busy and understaffed, and do not have enough nurses to effectively address immunization compliance issues. The district also has reduced secretarial support at schools because of recent budget cuts. We also learned secretarial staff have a high turnover rate and new staff have sometimes not been trained on immunization data entry and monitoring of conditional students. However, in January 2018 Evergreen hired a full-time immunization compliance clerk whose job focus is entirely on student immunizations and their compliance. As a result, the district told us they halved the out-of-compliance rate of kindergartners from about 33 percent to 16 percent during the 2018-2019 school year.

## School districts must find their own way forward to hold school principals accountable

Washington state law leaves school boards and district officials to sort out matters of oversight and enforcement themselves. In the case of student immunizations and the documents schools must obtain from parents, state law does not task either DOH or OSPI with oversight responsibility to monitor and ensure schools follow all requirements. Because the law does not provide a state oversight agency, oversight by district and school administrators is particularly important.

In the absence of oversight, we found some school district administrators use their own discretion to decide whether or not to exclude out-of-compliance students. This approach contradicts the state's intention to ensure a safe and healthy school environment for students, and neglects the primary enforcement tool state law gives principals to ensure parents provide proof of their children's immunization compliance: exclusion from school.

In Issaquah school district, the audit identified a particularly successful example of district-level oversight. Issaquah officials said it was a case of setting the "tone at the top" for high records compliance and immunization rates. District personnel said they became successful in enforcing student exclusions only after several years of educating principals, staff and parents that exclusion is a legal requirement and non-negotiable. The district's Health Services Supervisor told us that students they excluded from school for non-compliance usually only missed one or two days of school before parents provided the necessary paperwork for compliance.



## What are common barriers to families vaccinating their children, and how can school districts help minimize them?

### Schools and districts can help parents overcome some of the barriers they face in having their children vaccinated

As part of our conversations with schools and districts, we asked school and district staff what barriers they thought families in their area faced in meeting state documentation requirements and in having their children vaccinated. Schools are not the cause of these barriers, but in several areas, staff reported being able to help parents overcome barriers and to positively influence vaccination outcomes.

**Limited access to vaccination resources.** Both high-compliance districts (Orondo and Okanogan) and low-compliance districts (Port Townsend, Northport, Evergreen and Burlington-Edison) reported a lack of access to care as a barrier to vaccinations. Some schools said parents reported issues including a lack of health clinics in their communities, the cost of vaccinations, and the time taken away from work or other responsibilities to take their children to a vaccination clinic as barriers.

Some school districts are taking action to address the lack of access to vaccination resources:

- Orondo school district has provided transportation for students to clinics to be vaccinated
- Evergreen school district will be opening an on-site vaccination clinic in the 2019 school year
- Burlington-Edison district scheduled appointments for students when their family could not

At the state level, DOH's Childhood Vaccine Program supplies clinics and private healthcare providers with vaccination doses that are free for Washington residents aged 19 and under. While promoting this benefit for children could reduce parents' objections to the cost of vaccinating their children, not all healthcare providers are enrolled in the program, and the program does not necessarily cover the full cost of the visit itself.

To find the providers who received publicly-supplied vaccines through the Childhood Vaccine Program and Adult Vaccine Program near you, please visit: <https://fortress.wa.gov/doh/vaccinemap/>

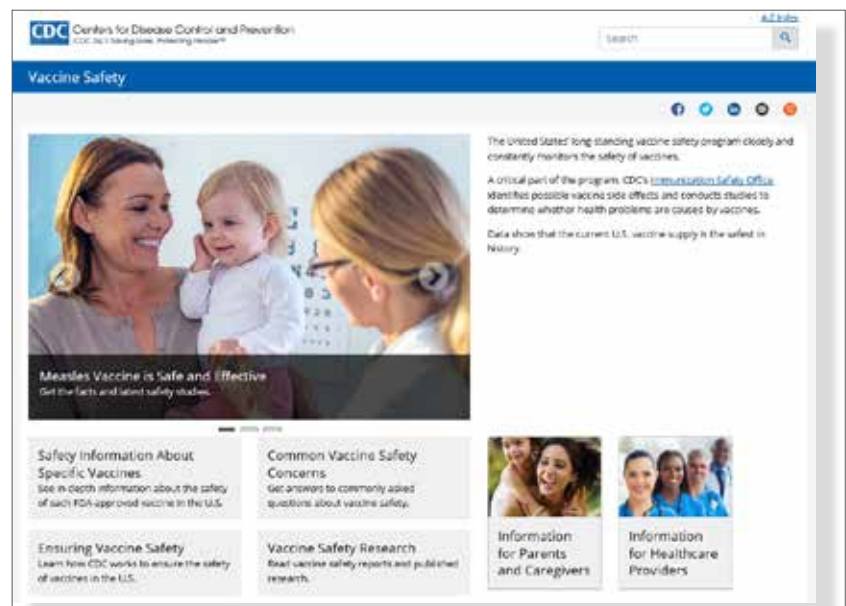
**Parents who choose not to vaccinate their children or vaccinate on a delayed schedule.** Again, both high-compliance districts (Okanogan and Colfax) and low-compliance districts (Port Townsend, Northport, Evergreen and Burlington-Edison) reported the presence of groups of parents who:

- Choose not to vaccinate their children
- Choose to vaccinate children on a schedule that is outside the required timeframe adopted by the State Board of Health
- Are willing to vaccinate, but are not fully aware of state immunization requirements

To address these matters, some of these schools and districts work with these parents to build relationships and provide information to address their concerns. Okanogan officials said they work with parents to understand why their children are behind on their vaccinations, adding that “not being judgmental with parents is the key.” Northport said it holds immunization nights, where school or district staff offer educational information about vaccination to the community.

**Language barriers that contribute to poor understanding of immunization requirements.** Staff in Orondo and Evergreen school districts reported language was a barrier to vaccination. Evergreen sent a survey to all parents of out-of-compliance students. One question asked if parents knew how to bring a child up-to-date on immunization: More than 21 percent of Russian speakers and 40 percent of Spanish speakers did not know, compared to about 11 percent of English-speaking parents.

To overcome this language barrier, Orondo and Evergreen, as well as Issaquah and Okanogan, provide interpretation services and/or provide information about state immunization requirements and other vaccination materials in multiple languages.



Schools can address vaccine safety concerns by providing information readily available from the Centers for Disease Control and Prevention's website (<https://www.cdc.gov/vaccinesafety/index.html>).

# State Auditor's Conclusions

Because of widespread vaccination efforts, outbreaks of preventable diseases used to be rare in this country. However, as vaccination rates have fallen in certain areas, outbreaks have become more frequent. Washington state experienced a significant measles outbreak just this year, prompting the state Legislature to reduce the options for obtaining an exemption for receiving the measles, mumps and rubella vaccine.

To help limit outbreaks of preventable diseases, Washington has set a public policy goal of a 95 percent immunization rate. This is a level of protection against disease often referred to as “herd immunity.” Schools play an essential role in this process. In fact, existing state law is clear: Schools must collect proof of immunization or a valid exemption for every student on or before the first day of school. Without these records, schools are not supposed to allow students to attend school.

The immunization data collected by the Washington Department of Health (DOH) shows not all schools in the state are following the law, nor are they collecting these records consistently. Because of this, the state's true immunization rate is not known. That is both bad and easy to fix.

This audit shows that several school districts in Washington have succeeded in complying with state law regarding immunization records, and therefore taken steps to ensure herd immunity. Their practices are clear, effective, and simple: clearly communicate the rules to parents, pay attention to whether they comply, and enforce the law when necessary. Additionally, DOH offers a robust set of materials to assist schools in this area.

The intent of the law is to ensure herd immunity, not perfect paperwork collection. But it is impossible to know where the state stands on its public health goal without compliance with immunization record-keeping. In addition to the difficulty some districts have with immunization records, there are other districts that aren't included in the immunization data compiled by DOH.

Right now, the burden of ensuring school administrators comply with the law rests with superintendents and elected school boards. However, if schools, school districts and local leaders do not make immunization compliance a priority, state leaders might consider enacting a statewide accountability system to enforce the rules and help meet the goal of herd immunity.

# Recommendations

## For all audited school districts and schools

1. To help ensure parents are aware about legal requirements, ways to comply with them and the consequences of noncompliance:
  - a. Inform students' parents or guardians of consequences for failure to comply with state immunization requirements, as discussed on page 18
  - b. Provide materials related to the benefits and risks of vaccination in languages other than English to appropriate student population, as discussed on pages 18-19
  - c. Provide timely and frequent information about all the options that parents or guardians can use to put their children in compliance with immunization requirements, as discussed on pages 20
  - d. Adopt applicable practices found in Appendix C of this report, and use state compliance and vaccination resources found in Appendix G
2. To ensure staff understand their roles and responsibilities related to immunization compliance and monitoring, develop clearly documented roles and responsibilities, as discussed on page 22
3. To ensure school chief administrators follow the law:
  - a. Schools should exclude students who do not comply with immunization requirements in accordance with RCW.28A.210.120, as discussed on page 15
  - b. School districts should develop an accountability process to ensure exclusion is performed when necessary, as discussed on page 24

## Guidance for all Washington school districts

We consider the audit results so broadly applicable that it is in the state's best interest for every school district to undertake any relevant and repeatable practices reported by districts that participated directly in the audit. We suggest all Washington school districts consider implementing practices found throughout the report and summarized in Appendix C of this report, and work together and with the community to foster greater collaboration and coordination at a local and regional level.

# School District Responses



Laurel W. Browning, Superintendent  
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Burlington, WA 98233  
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November 22, 2019

The Honorable Pat McCarthy  
Washington State Auditor  
Insurance Building, Capitol Campus  
302 Sid Snyder Avenue SW  
Olympia, WA 98504-0021

Re: SAO Performance Audit Response

Dear State Auditor McCarthy:

Thank you for the opportunity to review and respond to the Common Barriers to Compliance with Student Immunization Requirements performance audit. As the audit report indicates, school district compliance with vaccination requirements is an important public safety measure to help prevent the spread of infectious diseases and avoid disruptions to student learning.

At Burlington-Edison School District, we engage in many of the same practices employed by the “high compliance” districts outlined in this report. We commit to continue building on our best practices and support the recommendations of the report including:

- Ensuring that our parent partners, in their home language, are aware of legal requirements related to vaccination documentation, ways to comply with these requirements and the consequences of noncompliance and,
- Supporting staff with clear information about their roles and responsibilities related to compliance and monitoring.

We will continue to explore practices related to the exclusion of students who are out of compliance while still meeting our District mission to educate each student for lifelong success. Burlington-Edison School District recognizes that schools play an essential role in achieving the Washington state public policy goal of a 95 percent immunization rate. Thank you again for the opportunity to comment on this performance audit.

Respectfully,

A handwritten signature in black ink that reads 'Laurel W. Browning'.

Laurel W. Browning  
Superintendent, Burlington-Edison School District



## **Colfax School District No. 300**

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Jennings Elementary (509) 397-2181  
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Colfax High School (509) 397-4368  
FAX (509) 397-2414

The Honorable Pat McCarthy  
Washington State Auditor  
Insurance Building, Capitol Campus  
302 Sid Snyder Avenue SW  
Olympia, WA 98504-0021

Re: SAO School Immunization Audit

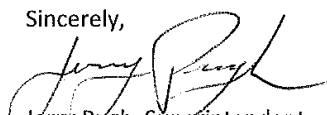
Dear State Auditor McCarthy,

Thank you for the opportunity to review and provide input to the School Immunization Audit that the Colfax School District participated in this past fall 2019. As noted in the report, Colfax School District takes seriously the requirement to ensure that our school families abide by the immunization laws of the State of Washington.

Throughout each school year administrators and nurses work diligently with our students and their families to ensure that all students are immunized or have appropriately followed the opt out procedures. We realize the importance that student immunization plays in the education and safety of our students. It was a privilege for us to be chosen as a successful district and to provide feedback as to our practices and protocols. It is our sincere hope that as this audit is made available that we can improve our immunization program from what we have learned from other successful districts listed in the audit.

It is our plan and intent to continue to review our immunization tracking and education practices to ensure that each Colfax School District student and families continue to comply with state immunization requirements.

Sincerely,



Jerry Pugh, Superintendent  
Colfax School District



## Evergreen Public Schools

November 25, 2019

The Honorable Pat McCarthy  
Washington State Auditor  
Insurance Building, Capitol Campus  
302 Sid Snyder Avenue SW  
Olympia, WA 98504-0021

Dear State Auditor McCarthy,

Thank you for the opportunity to review and respond to the Common Barriers to Compliance with Student Immunization Requirements performance audit. As the audit report indicates school vaccination laws are part of an effort to reach a level of protection against disease.

Evergreen Public Schools has been working on increasing our vaccination rates as well as improving our strategies to increase compliance. Since January 2018, with the addition of a Compliance Clerk position, we have seen an improvement in our vaccination rates.

As noted in the report, the recommendations that include relevant and repeatable good practices reported by districts with high compliance rates should be considered. The following are steps that are part of our plan to increase compliance.

**SAO Recommendation 1:** Districts and schools should help ensure parents are aware of legal requirements related to vaccination documentation, all of the ways to comply with those laws, and the consequences of non-compliance.

**District Action Steps:** Evergreen Public Schools will provide clear communication to parents/guardians regarding vaccine requirements, compliance and consequences through the use of phone contact, email messaging, website postings school e-newsletters, social media outlets, sandwich board advertisements, and large group presentations such as kindergarten open house and orientation events. Communication regarding immunization requirements will include providing examples of the types of acceptable documents including exemption forms and titer result options. Our schools will begin communication during early enrollment to ensure that parents/guardians have adequate time to secure the necessary documentation. Our schools will also send frequent reminders to parents/guardians of students who are missing immunizations.

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*Evergreen Public Schools is an Equal Opportunity Employer*

**SAO Recommendation 2:** Districts should provide materials about compliance and the benefits and risks of vaccinations in languages other than English when appropriate.

**District Action Steps:** When working with families who communicate in a language other than English, Evergreen Public schools will use a variety of translated materials from the DOH website, telephone translation service, and support from ELL staff.

**SAO Recommendation 3:** Districts should ensure staff understand their roles and responsibilities related to immunization compliance and monitoring.

**District Action Steps:** Evergreen Public Schools will continue to train, support and follow-up with staff responsible for immunization compliance. Beginning in December 2019, Evergreen Public Schools will provide school registrars with enhanced immunization training including clear definitions of the roles and responsibilities for the staff responsible for immunization compliance.

**SAO Recommendation 4:** Schools should exclude students who are out of compliance as is required by law and districts should hold schools accountable for following the law.

**District Action Steps:** Evergreen Public Schools will plan for exclusion of students who are out of compliance with required immunizations. We will work with building principals to ensure that schools are accountable for timely exclusions. Building principals will clearly communicate to parents that exclusion is a legal requirement.

Thank you for collaborating with various staff within our district during the audit process. Attached is the most current table of immunization rates for Evergreen Public Schools.

Sincerely,



Mike Merlino  
Superintendent



Holly Long, M.Ed., R.N.  
Health Services Manager



## K-12 Out of Compliance All Imms 11.25.19

Entity Name	Entity number	Kinder	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	11th	12th	Total
Fishers Landing	102	17	4	7	5	5	6								44
Harmony	103	8	10	8	5	3	10								44
Burnt Bridge Creek	104	9	2	10	3	5	3								32
Orchards	112	20	9	11	8	13	9								70
Marrion	118	12	9	9	7		4								41
Crestline	122	13	13	9	11	8	8								62
Silver Star	123	9	10	5	7	7	4								42
Mill Plain	129	17	7	7	3	6	6								46
Burton	136	8	1	5	4	2	2								22
Pioneer	145	4	8	6	8	11	9								46
Ellsworth	148	4				1	1								6
Sifton	149	1	6	4	2	7	4								24
Illahee	155	6	3	9	6	9	5								38
Columbia Valley	156	18	8	5	2	6	9								48
Endeavour	157	13	6	17	16	11	6								69
York	158	8	4	4	2	3	1								22
Hearthwood	163	12	8	6	1	3	2								32
Sunset	170	23	15	18	15	15	13								99
Fircrest	171	13	12	19	13	17	10								84
Image	194	20	15	7	14	8	7								71
Riverview	195	10	7	5	4	8	11								45
Pacific M.S	209							65	55	41					161
Covington M.S	220							117	121	86					324
Frontier M.S	232							70	62	57					189
Wyeast M.S	251							98	71	49					218
Shahala M.S	266							74	59	75					208
Cascade M.S	285							165	90	63					318
Evergreen H.S	424										73	60	92	83	308
Mtn. View H.S	462										126	76	98	124	424
Hela H.S	474										32	32	38	66	168
Heritage H.S	477										111	77	75	98	361
Union H.S	478										71	70	66	67	274
Legacy High	567												5	50	55
Home Choice Acad.	576														
49th Street Acad.	581														
Total By Grade	Total	245	157	171	136	148	130	589	458	371	413	315	374	488	3995

District wide % of total number of students out of compliance based on average enrollment of 24,500	
9.2.19	27%
11.4.19	20%
11.12.19	18.80%
11.22.19	16%

Attachment from Evergreen School District



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**Karen Thies**, Health Services Supervisor

November 22, 2019

The Honorable Pat McCarthy  
Washington State Auditor  
P.O. Box 40021  
Olympia, WA 98504-0021

Dear Auditor McCarthy:

Thank you for the opportunity to review and respond to the State Auditor's Office performance audit report, "Common Barriers to Compliance with Student Immunization Requirements."

I appreciate the report's recognition of the Issaquah School District's high immunization rate for students. Our school nurses and assistive personnel spend considerable time over the course of the school year monitoring immunizations, contacting parents, educating them about the state immunization requirements, contacting healthcare providers and providing resources where parents can get their children immunized.

Our school administrators and the executive leadership team recognize the value of their support which is an important component of ensuring families comply with immunization laws. This support comes in the form of communicating with families and consistent reinforcement of the exclusion of students from school when their families are not complying with immunization laws.

Please thank your staff for their collaborative approach throughout the audit process.

Sincerely,

Karen Thies, DNP, RN  
Health Services Supervisor

cc: Ron Thiele, Superintendent, Issaquah School District

Dr. Josh Almy, Deputy Superintendent, Issaquah School District

**Board of Directors**

Harlan Gallinger • Marnie Maraldo • Anne Moore • Sydne Mullings • Suzanne Weaver



*Northport School District is an innovative school that will.....  
Inspire lifelong success by empowering students with knowledge, skills,  
and opportunities*

**Northport Schools**

District # 211

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Human Resources  
509-732-4251 ext. 116

**Tina Kingsbury**  
Secretary  
509-732-4430 ext. 162

**Alistair Shull**  
Athletic Director  
509-732-4430 ext. 134

**Tanis Shippy**  
Guidance Counselor  
509-732-4430 ext. 155

11/22/2019

Office of the Washington State Auditor,

I agree with the recommendations and we have really worked to change how we operate to align with those recommendations. We have called weekly, sent more descriptive letters, assisted in making appointments and had thorough follow up with nurse and secretarial staff, done weekly.  
Sincerely,

*Don Baribault*

Northport School District  
Superintendent/Special Services Director  
School Phone 509-732-4430 ext. 131  
Cell Phone 509-675-8343  
[dbaribault@northportschools.org](mailto:dbaribault@northportschools.org)



“We inspire lifelong success by empowering students with knowledge, skills, and opportunities.”



The Northport School District does not discriminate in any programs or activities on the basis of sex, race, creed, religion, color, national origin, age, veteran or military status, sexual orientation, gender expression or identity, disability, or the use of a trained dog guide or service animal and provides equal access to the Boy Scouts and other designated youth groups. The following employee(s) has been designated to handle questions and complaints of alleged discrimination: Donald Baribault, Civil Rights Compliance Coordinator, Section 504/ADA Coordinator, Title IX/Sex Equity Officer; [dbaribault@northportschools.org](mailto:dbaribault@northportschools.org); (509) 732-4251; P.O. Box 1280 Northport, WA 99157. AN EQUAL OPPORTUNITY EMPLOYER



**OKANOGAN SCHOOL DISTRICT #105**  
**Celebrating the Past, Embracing the Present, Shaping the Future**

December 3, 2019

The Honorable Pat McCarthy  
Washington State Auditor  
P.O. Box 40021  
Olympia, WA 98504-0021

Dear Auditor McCarthy:

Thank you for the opportunity to review and respond to the State Auditor's Office performance audit report, "Common Barriers to Compliance with Student Immunization Requirements." Okanogan School District has developed practices which produce high compliance rates in regard to required immunizations.

As public educators, we see our number one priority as educating children. The notion of exclusion due to lack of immunization does not match the priority of public schools. However, due to Washington State law, schools are forced to exclude students regardless of philosophical beliefs. This is why Okanogan works collaboratively with school officials including, building principals, building secretaries and the school nurse to go above and beyond to ensure compliance with immunization requirements. The SAO recommends schools develop clearly documented roles and responsibilities to ensure staff understand their roles and responsibilities to immunization compliance and monitoring. In addition to clearly defined roles and responsibilities staff must be willing to become active participants in the process of informing families. The staff mentioned above assisted in making phone calls, mailing letter or having personal, face to face conversations with effected families.

Okanogan School District recognizes the importance of the SAO's recommendation to follow the law. While exclusion is not something schools are accustomed to, we believe, the necessity of exclusion is preventable. The single most important factor in preventing exclusion is providing accurate information to families and an established timeline. In corresponding with families Okanogan had more success when families were given a specific date to adhere to. Follow up was provided on behalf of the district, which allowed our staff to accurately track compliance rates.

The efforts made by district staff to ensure immunization compliance comes at a great cost. The report does not discuss the need for resources to continue monitoring compliance around health issues. The State of Washington must recognize the need for additional nurses in schools. Currently, Okanogan School District has one, part-time school nurse who serves 1,100 students. Additional duties such as monitoring immunization compliance takes away from providing treatment to students, making recommendations to staff regarding students, and allowing the

care students deserve when they are in school. I urge the State to recognize the need for additional nurses in schools to better serve our students.

Please thank you staff for their assistance throughout the audit process.

Sincerely,



Ashley Goetz, Superintendent  
Okanogan School District

# ORONDO SCHOOL DISTRICT

100 Orondo School Rd ORONDO, WA 98843 (509) 784-1333 FAX (509)784-0633

November 25, 2019

The Honorable Pat McCarthy  
Washington State Auditor  
P.O. Box 40031 Olympia, WA 98504

Re: Common Barriers to Compliance with Student Immunization Requirements Audit

Dear State Auditor McCarthy:

Thank you for the opportunity to review and respond to the Student Immunization Requirements audit. As the audit report indicates, clear and frequent communications about vaccination requirements, as well as options for parents to gain compliance has helped Orondo School District achieve better student immunization compliance.

At the Orondo School District, we implemented policies and practices that enabled our staff to continuously keep up to date on immunization requirements. Specifically, we found we were more successful in ensuring compliance by using the following processes:


- Developing a year-round internal calendar to ensure immunization requirements are addressed in a timely fashion
- Utilizing staff meetings to regularly address the topic of immunization
- Having a dedicated staff member responsible for record keeping and compliance outreach
- Reaching out directly to parents, via multiple channels, to communicate immunization requirements

Overcoming obstacles, such as a lack of access to care, cultural barriers, we found success using the following processes:

- Utilizing our bilingual and bicultural staff to help ensure our Latino population understands the vaccination requirements
- Providing transportation to students to clinics for vaccinations

This audit confirms Orondo School District's processes and policies have enabled our success with regard to immunization compliance. Students and families who have access to resources and information are more likely to be compliant with the state law. We plan to continue using the resources that have allowed us to be successful in the future.

Sincerely,



Ismael Vivanco, Ed. D.  
Superintendent, Orondo School District

The Orondo School District prohibits discrimination on the basis of sex, race, creed, religion, color, national origin, age, marital status, honorably discharged veteran or military status, sexual orientation including gender expression or identity, the presence of any sensory, mental, or physical disability, or the use of a trained dog guide or service animal by a person with a disability in its programs and activities, and provides equal access to the Boy Scouts and other designated youth groups. The following employee, has been designated to handle questions and complaints of alleged discrimination and can be reached as follows: Dr. Ismael Vivanco (Title IX, Section 504, and Civil Rights Compliance Coordinator) via e-mail at [ivivanco@orondo.wednet.edu](mailto:ivivanco@orondo.wednet.edu) or call (509) 784-2443, or by mail at Orondo School District, 100 Orondo School Rd, Orondo, WA 98843.



**PORT TOWNSEND**  
**School District**  
 LEARNING THROUGH A SENSE OF PLACE

**Superintendent**  
 Dr. John A. Polm, Jr.

**Board of Directors**  
 Connie Welch, Chair  
 Jennifer James-Wilson  
 Laura Tucker  
 Nathanael O'Hara  
 Keith White

November 25, 2019

The Honorable Pat McCarthy  
 Washington State Auditor  
 Insurance Building, Capitol Campus  
 302 Sid Snyder Avenue SW  
 Olympia, WA 98504-0021

Re: SAO Performance Audit

Thank you for the opportunity to review and respond to the Immunization performance audit draft report from November 4, 2019. As the audit report indicates, there are identified common barriers to compliance with student immunization requirements.

In Port Townsend, our district has been working closely with our local Public Health Department prior to the SAO announced that the district would be audited based on 2017-2018 self-reported kindergarten data. The district goals have included helping to improve the county compliance rates by improving the rates in Port Townsend Schools.

During the 2018-2019 school year, Port Townsend School District

- A. Took part in a community immunization work group to address strategies to improve compliance with immunization requirements;
- B. Held a School Board study session during which the county Health Department Director and staff presented data and discussed recommendations to procedures intended to improve compliance with immunization requirements; and
- C. Developed a flow chart of responsibilities and actions assigned to school staff to include regular reports and principal meeting review, school nurse review and outreach, school principal outreach and extensive notifications via email, social media and in person school gatherings.

During the 2019-2020 school year, Port Townsend District and Schools implemented several strategies that:

1610 Blaine Street, Port Townsend, WA 98368  
 Phone: 360-379-4501 Fax: 360-385-3617  
[www.ptschools.org](http://www.ptschools.org)

- A. Informed students' parents or guardians of consequences for failure to comply with state immunization requirements through a variety of methods;
- B. Trained and equipped office staff with information on the immunization requirements and resources available to families;
- C. Provided materials related to the benefits and risks of vaccination in languages other than English where needed;
- D. Provided timely and frequent information about all the options that parents or guardians can use to put their children in compliance with immunization requirements;
- E. Engaged school nurses and each school principal in personally contacting parents, regarding the need to be in compliance with immunizations, prior to student exclusions; and
- F. Excluded students who were/are out of compliance with immunization requirements in accordance with RCW.28A.210.120.

It should be noted that Port Townsend, like many other districts, does not receive enough state allocation to support full time nursing services. The district increased from .6 FTE nursing services from 2017-2019 to .8 FTE nursing services in 2019-2020.

The Port Townsend School District is committed to continued improvement through an articulated and continuous process of ensuring compliance of immunization requirements. The district appreciates the review and input from the Office of the Washington State Auditor through this Immunization Performance Audit.

Sincerely,



Dr. John A. Polm, Jr.  
Superintendent



# Appendix A: Initiative 900 and Auditing Standards

## Initiative 900 requirements

Initiative 900, approved by Washington voters in 2005 and enacted into state law in 2006, authorized the State Auditor’s Office to conduct independent, comprehensive performance audits of state and local governments.

Specifically, the law directs the Auditor’s Office to “review and analyze the economy, efficiency, and effectiveness of the policies, management, fiscal affairs, and operations of state and local governments, agencies, programs, and accounts.” Performance audits are to be conducted according to U.S. Government Accountability Office government auditing standards.

In addition, the law identifies nine elements that are to be considered within the scope of each performance audit. The State Auditor’s Office evaluates the relevance of all nine elements to each audit. The table below indicates which elements are addressed in the audit. Specific issues are discussed in the Results and Recommendations sections of this report.

I-900 element	Addressed in the audit
1. Identify cost savings	<b>No.</b> The audit focused on school district controls to help ensure compliance with state immunization requirements and did not identify cost savings.
2. Identify services that can be reduced or eliminated	<b>No.</b> State law assigns responsibility for the enforcement of state immunization requirements to the chief administrators of Washington’s schools. This is not a service that can be reduced or eliminated.
3. Identify programs or services that can be transferred to the private sector	<b>No.</b> State law assigns responsibility for the enforcement of state immunization requirements to the chief administrators of Washington’s schools. This is not a service that can be reduced or eliminated.
4. Analyze gaps or overlaps in programs or services and provide recommendations to correct them	<b>Yes.</b> We identified gaps in the enforcement of current laws requiring school district officials to exclude students who are out of compliance with the state’s vaccination requirements.

**I-900 element****Addressed in the audit**

- |   |   |
|---|---|
| 5. Assess feasibility of pooling information technology systems within the department   | <b>No.</b> The audit did not assess the feasibility of pooling information technology systems because the audit focused on the enforcement of state immunization requirements.  |
| 6. Analyze departmental roles and functions, and provide recommendations to change or eliminate them  | <b>Yes.</b> The audit analyzed the roles and functions of administrators and staff at school districts and schools and recommended improvements to their management and oversight of student immunization requirements. |
| 7. Provide recommendations for statutory or regulatory changes that may be necessary for the department to properly carry out its functions | <b>No.</b> The audit did not recommend statutory or regulatory changes.   |
| 8. Analyze departmental performance data, performance measures and self-assessment systems  | <b>Yes.</b> The audit reviewed school performance related to student immunization compliance outcomes.  |
| 9. Identify relevant best practices   | <b>Yes.</b> The audit compared practices of low compliance school districts with those found in high compliance school districts to determine good practices.   |

## Compliance with generally accepted government auditing standards

We conducted this performance audit under the authority of state law (RCW 43.09.470), approved as Initiative 900 by Washington voters in 2005, and in accordance with generally accepted government auditing standards as published in Government Auditing Standards (December 2011 revision) issued by the U.S. Government Accountability Office. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

## The mission of the Office of the Washington State Auditor

To provide citizens with independent and transparent examinations of how state and local governments use public funds, and develop strategies that make government more efficient and effective.

The results of our work are widely distributed through a variety of reports, which are available on our website and through our free, electronic [subscription service](#). We take our role as partners in accountability seriously. We provide training and technical assistance to governments and have an extensive quality assurance program.

For more information about the State Auditor's Office, visit [www.sao.wa.gov](http://www.sao.wa.gov).

### Americans with Disabilities

In accordance with the Americans with Disabilities Act, this document will be made available in alternative formats. Please email [Communications@sao.wa.gov](mailto:Communications@sao.wa.gov) for more information.

# Appendix B: Scope, Objectives and Methodology

## Scope

The audit focused on Washington school districts and public elementary school compliance with state law requiring them to document and report on students' immunization status. It examined school and district practices to understand how they achieved their vaccination and record-keeping compliance rates, and what, if anything they do to overcome the barriers they face.

We audited eight school districts based on their self-reported kindergarten immunization records compliance rates: four high-compliance districts and four low-compliance districts. Our audit period was the 2017-18 school year but we also learned about practices used during the 2018-19 school year and other practices to be adopted in the 2019-20 school year.

We did not review student immunization compliance documents or audit any immunization data entered into the state's Immunization Information System. We also did not audit how legal exemptions from vaccinations factor into immunization compliance rates.

## Objectives

The audit was designed to answer the following questions around school immunization compliance practices:

1. Why are noncompliance rates for student immunizations high for some school districts?
2. What are common barriers to families vaccinating their children, and how can school districts help minimize them?

To answer question 1, we looked into:

- True vaccination rates in Washington
- Some principals' choice not to exclude out-of-compliance students
- How schools with high compliance rates achieved their rates
- What schools with lower compliance rates need to improve
- Who should hold school principals accountable

## Methodology

To answer the audit questions we used qualitative and quantitative approaches. Each of these methods contributed to answering our audit questions.

### Analyzed compliance rates for school districts and schools

We analyzed the immunization status of kindergartners reported by school districts and schools to DOH to select the school districts examined in this audit. The data consists of total student enrollment and immunization status of these students. This data is self-reported by schools and not verified by DOH personnel.

We selected kindergarten students as the primary unit of analysis for two reasons. First, DOH collects student immunization data during kindergarten and sixth grade. Second, kindergarten is usually the first time a child attends the public school system.

We tested the reliability of the DOH enrollment data by comparing it to kindergarten enrollment data produced by the Office of the Superintendent of Public Instruction. We determined the data sufficiently reliable for our purposes as enrollment for sample districts was within 6 percent or less of what was reported by OSPI. We also verified that the school districts reporting were not charter schools, tribal schools or other school types.

School districts were selected for further evaluation based on the following factors: 1) a balance of high and low compliance districts 2) district enrollment, and 3) consistent compliance rates over time. The sampling method used is sufficient to allow us to compare and contrast districts and gain insights into the practices that lead to better compliance. However, the results are not statistically projectable to the full population of all school districts.

#### *Balance of high and low compliance rates*

We selected four districts with the lowest percentages of out-of-compliance students (high compliance schools) and four with the highest percentages of out-of-compliance students (low compliance schools).

#### *District enrollment*

We used the total reported enrollment for K-12 students during the 2017-18 school year to determine the size of the school district as defined by OSPI (Figure 1). We selected two small, four medium and two large districts to learn about practices they use and barriers to vaccination their students experience. Four medium districts were selected because most districts in the state meet that criteria.

**Figure 1: OSPI district sizing criteria**

Enrollment	OSPI district size
Fewer than 999	Small
More than 1,000	Medium
More than 10,000	Large

The student immunization data from DOH included results for both public and private schools. This is because both are required to report this information, however for this audit we focused only on the results submitted by public schools.

#### *Consistent compliance rates over time*

To ensure that the selected school districts have reliable rates of compliance, we incorporated historical compliance rates for kindergarten and 6th grade students. We chose to use these school grade levels

because schools are required to report compliance levels for students entering both grades. These rates span the 2013-14 to the 2016-17 school years.

We calculated the difference between the historical rates and the most recent year of data available (2017-18 school year) for kindergarten and 6th grade. We then highlighted those rate differences that fell within 15 percent of the 2017-18 school years compliance rate. Those school districts that had more consistent compliance rates historically were given priority in our selection.

We selected 12 schools to audit within the eight districts. Selections were based on compliance and immunization rates. **Figure 2** shows the chosen schools and districts, with the number of kindergarteners enrolled, percent fully immunized, and percent out of compliance.

**Figure 2 – Immunization compliance data for audited districts and elementary schools**  
2017-2018 school reported data

High compliance elementary schools and districts				
Districts and schools	District size	Kindergartners:		
		Enrolled	Fully immunized	Out-of-compliance
<b>Colfax SD</b>	Medium	42	100%	0%
Leonard M Jennings		42	100%	0%
<b>Issaquah SD</b>	Large	1,460	94%	0%
Briarwood		102	96%	0%
Sunny Hills		115	97%	0%
<b>Okanogan SD</b>	Medium	83	94%	0%
Grainger		83	94%	0%
<b>Orondo SD</b>	Small	15	100%	0%
Orondo		15	100%	0%
Low compliance elementary schools and districts				
Districts and schools	District size	Kindergartners:		
		Enrolled	Fully immunized	Out-of-compliance
<b>Burlington-Edison SD</b>	Medium	261	71%	25%
Bay View		48	83%	10%
West View		118	52%	47%
<b>Evergreen (Clark) SD</b>	Large	1,752	60%	32%
Crestline		96	47%	49%
Ellsworth		61	43%	51%
<b>Northport SD</b>	Small	23	22%	61%
Northport		12	42%	25%
Northport Homelink K-8		11	0%	100%
<b>Port Townsend SD</b>	Medium	68	71%	25%
Grant Street		68	71%	25%

Source: Auditor prepared based on self-reported data found in the 2017-2018 DOH kindergarten student immunization status report.

## Reviewed districts' internal controls related to managing student immunization compliance requirements

### *Conducted interviews with district and school officials and reviewed supporting evidence*

We sought the perspectives of district and school officials (superintendents, principals, nurses and administrative staff) regarding their specific practices related to managing student immunization compliance requirements, the barriers families face to vaccination, and potential solutions to overcoming those barriers.

Interviews were performed by telephone or over a computerized conferencing system. We analyzed interview notes to identify common themes amongst school districts. During the interviews, we requested documentation to corroborate the claims made in their interviews. This information was reviewed and summarized concurrently with our interview notes. We also held preliminary results meetings with each of the eight school districts to verify our overall findings and conclusions.

We then compared practices of high-compliance districts to the practices of the low-compliance ones to understand what specifically contributed to the success of high-compliance districts. We also asked each district about local barriers to vaccination and possible ways schools can address them.

### *Examined school district policies and procedures*

We requested and examined school district policies and procedures to identify gaps or conflicts. To perform our review, we used model language proposed by the Washington State School Directors' Association (WSSDA). In particular, we verified which districts stated what immunization documentation is needed for student enrollment, what legal exemptions are available, and when and how students will be excluded from attending school if they do not comply with the state's requirements.

# Appendix C: Practices to Overcome Barriers to Vaccination and Increase Compliance Rates

This appendix summarizes the practices districts and schools said they used to improve their compliance rates and address vaccination barriers. Given the limited scope of the audit, this summary should not be considered an exhaustive list of successful practices in Washington. However, the practices identified here may be useful to districts and schools when they consider improving their own policies and procedures around immunization records.

## Actively help parents understand Washington's immunization requirements

### 1. Give parents complete information about immunization compliance requirements

- Explain that Washington requires all schools to collect an immunization record from every child when enrolling in kindergarten or entering a new school for the first time.
- **Start with the bottom line:** Tell parents the law requires you to exclude any child that lacks proof of immunization or exemption from school.
- **Tell them all their options: Choosing an exemption, providing results of a titer test or a schedule of immunization.** Make sure parents understand the types of documents your school can accept to comply with state law: a certificate of immunization or a certificate of exemption. These documents might be accompanied by results of a titer test signed by a healthcare professional or a schedule of immunization. Explain how parents can obtain conditional entry to school for their child by working with you to agree on a schedule of vaccinations.

### 2. Speak their language

- Use tools and languages that reach the district's population. Give them information about vaccinations and requirements using translated materials from DOH's website.

### 3. Tell them early and often: Start well before the new school year starts and continue year round

- Make immunization compliance and documentation a year-round endeavor.
- Talk to parents well before the beginning of school year and keep in touch year round, especially with families that are in conditional status and may need help to stay on track completing vaccinations.



- 4. Don't hesitate to follow up:** Send frequent reminders to parents about their child's missing immunization records.
- 5. Take multiple opportunities to educate parents about immunization compliance requirements**
  - Have nurses attend kindergarten enrollment or orientation events to talk about the importance of vaccinations and answer questions about compliance requirements.
  - Use social media, e-newsletters, radio ads, posters, sandwich boards – whatever works in your community – to remind parents of the importance of vaccinations, legal requirements for student attendance, and what proof of student immunization compliance is needed.

## Develop district and school procedures to regularly review and monitor student immunization compliance status

- 1. Clearly define the roles and responsibilities of all staff involved in the student immunization compliance process**
  - Develop desk procedures for staff involved in the process
  - Clarify the process with a calendar of month to month tasks
- 2. Have staff responsible for immunization compliance meet monthly**
  - Review the immunization status of students to exclude, and develop actions school staff can take to help parents bring children in conditional status into compliance.
- 3. Notify parents of their child's missing immunization documents**
  - Send letters or emails, or speak to them directly over the phone or in person
  - Develop scripts for office staff to help them answer common questions from parents
- 4. Work with parents to:**
  - Understand barriers they encounter when getting vaccinations or obtaining proof of compliance for their children
  - Identify possible ways to help parents overcome the barriers
- 5. Exclude children from attending school when they lack immunization records**

## Develop appropriate resources to help parents overcome common barriers to getting their children vaccinated

- Schedule a vaccination clinic on campus, at a nearby medical facility, or at the local health authority
- Help parents schedule vaccination appointments for students
- Give parents a list of nearby clinics that offer student vaccinations
- Use the resources already available from DOH, local health jurisdictions and others. **Appendix G** lists some of the resources already available.

# Appendix D: Required Immunizations Before Entering Kindergarten

**Figure 3** – Required childhood immunizations before entering kindergarten

*Issued by Washington Department of Health for fiscal year July 1, 2019 – June 30, 2020*

Vaccination	Doses given by 16 months	Doses complete by 7 years old or entry to kindergarten
Diphtheria, tetanus, pertussis (DTaP)	3	5
Haemophilus influenzae type B (Hib)	4	Not given after age 5 unless child has a medical condition
Hepatitis B	2	3
Measles, mumps, rubella (MMR)	1 (Not to be given to infants before 12 months of age)	2
Pneumococcal Conjugate (PCV)	4	Not given after age 5 unless child has a medical condition
Polio	2	4
Varicella (chickenpox)	1, unless healthcare provider verified child had disease (Not to be given to infants before 12 months of age)	2, unless healthcare provider verified child had disease

Source: DOH website, <https://www.doh.wa.gov/Portals/1/Documents/Pubs/348-425-ChildcareImmReqforParents2019-2020.pdf>

# Appendix E: School District Vaccination Rates

Figure 4 tables list the immunization status of 262 school districts whose data is included in the DOH immunization database. Please note:

1. Data from 29 districts either was not included in DOH immunization database or was shown as having no kindergarteners for the 2017-2018 school year. These districts are included at the end of the tables.
2. Tables do not include data for 33 school districts because they reported less than 10 kindergarten students, even though they were included in our analysis. This is to protect student privacy. These districts are simply listed at the end of the appendix.

## Figure 4 – Numbers of public elementary school kindergartners reported as out of compliance

2017-2018 school reported data, including enrollment

Note: Rows are grouped by the percentage of kindergartners out of compliance, shown by orange lines between percent groups.

School district	Enrolled	Fully vaccinated	%	Conditional	%	Exempt	%	Out of compliance	%	County
Orcas Island	41	4	10%	0	0%	0	0%	37	90%	San Juan
Lyle	22	6	27%	0	0%	0	0%	16	73%	Klickitat
Cosmopolis	21	7	33%	0	0%	0	0%	14	67%	Grays Harbor
Northport	23	5	22%	0	0%	4	17%	14	61%	Stevens
Loon Lake	28	10	36%	0	0%	3	11%	15	54%	Stevens
Hockinson	109	45	41%	4	4%	9	8%	51	47%	Clark
Lopez	18	8	44%	0	0%	2	11%	8	44%	San Juan
Mary Walker	16	7	44%	1	6%	2	13%	6	38%	Stevens
Morton	19	11	58%	0	0%	1	5%	7	37%	Lewis
McCleary	44	28	64%	0	0%	0	0%	16	36%	Grays Harbor
Hood Canal	34	19	56%	2	6%	1	3%	12	35%	Mason
Chewelah	24	16	67%	0	0%	0	0%	8	33%	Stevens
Evergreen (Clark)	1,752	1,050	60%	30	2%	116	7%	556	32%	Clark
Grapeview	20	13	65%	1	5%	0	0%	6	30%	Mason
White Pass	28	19	68%	0	0%	1	4%	8	29%	Lewis
Ocean Beach	69	44	64%	1	1%	5	7%	19	28%	Pacific
White Salmon Valley	99	63	64%	1	1%	8	8%	27	27%	Klickitat
Coulee-Hartline	15	10	67%	0	0%	1	7%	4	27%	Grant

School district	Enrolled	Fully vaccinated	%	Conditional	%	Exempt	%	Out of compliance	%	County
Curlew	12	8	67%	0	0%	1	8%	3	25%	Ferry
Port Townsend	68	48	71%	0	0%	3	4%	17	25%	Jefferson
Burlington-Edison	261	185	71%	1	0%	10	4%	65	25%	Skagit
Grandview	273	202	74%	3	1%	1	0%	67	25%	Yakima
Thorp	17	10	59%	0	0%	3	18%	4	24%	Kittitas
Methow Valley	56	38	68%	1	2%	4	7%	13	23%	Okanogan
North Franklin	92	70	76%	1	1%	0	0%	21	23%	Franklin
Pioneer	86	64	74%	1	1%	2	2%	19	22%	Mason
Dayton	28	22	79%	0	0%	0	0%	6	21%	Columbia
Lake Stevens	479	351	73%	7	1%	19	4%	102	21%	Snohomish
Cusick	10	6	60%	1	10%	1	10%	2	20%	Pend Oreille
Lake Quinalt	15	11	73%	0	0%	1	7%	3	20%	Grays Harbor
Quilcene	10	3	30%	2	20%	3	30%	2	20%	Jefferson
Toutle Lake	51	37	73%	0	0%	4	8%	10	20%	Cowlitz
Concrete	42	34	81%	0	0%	0	0%	8	19%	Skagit
Prescott	21	17	81%	0	0%	0	0%	4	19%	Walla Walla
Nooksack Valley	180	141	78%	3	2%	3	2%	33	18%	Whatcom
Wishkah Valley	11	9	82%	0	0%	0	0%	2	18%	Grays Harbor
Lake Washington	2,243	1,753	78%	27	1%	64	3%	399	18%	King
Olympia	700	519	74%	11	2%	47	7%	123	18%	Thurston
Griffin	57	47	82%	0	0%	0	0%	10	18%	Thurston
South Whidbey	80	63	79%	0	0%	3	4%	14	18%	Island

School district	Enrolled	Fully vaccinated	%	Conditional	%	Exempt	%	Out of compliance	%	County
Soap Lake	29	18	62%	0	0%	6	21%	5	17%	Grant
Meridian	134	98	73%	2	1%	11	8%	23	17%	Whatcom
Cheney	386	294	76%	5	1%	21	5%	66	17%	Spokane
San Juan Island	47	33	70%	3	6%	3	6%	8	17%	San Juan
Central Valley	982	734	75%	12	1%	72	7%	167	17%	Spokane
Newport	71	55	77%	1	1%	3	4%	12	17%	Pend Oreille
Bremerton	268	207	77%	8	3%	8	3%	45	17%	Kitsap
Hoquiam	126	94	75%	4	3%	7	6%	21	17%	Grays Harbor
La Conner	42	34	81%	1	2%	0	0%	7	17%	Skagit
Ellensburg	277	226	82%	1	0%	8	3%	42	15%	Kittitas
Granite Falls	119	93	78%	6	5%	2	2%	18	15%	Snohomish
Kiona-Benton City	106	88	83%	0	0%	2	2%	16	15%	Benton
Granger	101	86	85%	0	0%	0	0%	15	15%	Yakima
Shelton	297	239	80%	9	3%	5	2%	44	15%	Mason
Steilacoom Hist.	250	201	80%	2	1%	10	4%	37	15%	Pierce
Montesano	94	75	80%	0	0%	6	6%	13	14%	Grays Harbor
Seattle P. S.	4,617	3885	84%	16	0%	80	2%	638	14%	King
Clarkston	192	157	82%	3	2%	6	3%	26	14%	Asotin
Sultan	148	125	84%	0	0%	3	2%	20	14%	Snohomish
Lynden	252	202	80%	5	2%	11	4%	34	13%	Whatcom
Eatonville	113	91	81%	2	2%	5	4%	15	13%	Pierce
Lakewood	181	147	81%	4	2%	6	3%	24	13%	Snohomish
Bellevue	1,307	1102	84%	1	0%	37	3%	167	13%	King
Stanwood-Camano	311	228	73%	7	2%	37	12%	39	13%	Snohomish
Inchelium	16	14	88%	0	0%	0	0%	2	13%	Ferry

School district	Enrolled	Fully vaccinated	%	Conditional	%	Exempt	%	Out of compliance	%	County
Mt. Baker	139	102	73%	8	6%	12	9%	17	12%	Whatcom
Davenport	33	26	79%	2	6%	1	3%	4	12%	Lincoln
North Thurston P. S.	1,117	932	83%	13	1%	37	3%	135	12%	Thurston
Oroville	42	36	86%	0	0%	1	2%	5	12%	Okanogan
Franklin Pierce	431	361	84%	7	2%	12	3%	51	12%	Pierce
Ocosta	34	29	85%	0	0%	1	3%	4	12%	Grays Harbor
Rainier	69	54	78%	1	1%	6	9%	8	12%	Thurston
Highline	1,520	1305	86%	16	1%	23	2%	176	12%	King
Federal Way	1,842	1551	84%	14	1%	64	3%	213	12%	King
North Beach	62	54	87%	1	2%	0	0%	7	11%	Grays Harbor
Selah	259	220	85%	7	3%	3	1%	29	11%	Yakima
Arlington	394	319	81%	7	2%	24	6%	44	11%	Snohomish
Kittitas	54	47	87%	0	0%	1	2%	6	11%	Kittitas
Republic	27	22	81%	0	0%	2	7%	3	11%	Ferry
Cle Elum-Roslyn	56	47	84%	1	2%	2	4%	6	11%	Kittitas
Columbia (Walla Walla)	47	38	81%	1	2%	3	6%	5	11%	Walla Walla
Warden	67	59	88%	0	0%	1	1%	7	10%	Grant
Wahkiakum	29	23	79%	0	0%	3	10%	3	10%	Wahkiakum
Omak	194	167	86%	1	1%	6	3%	20	10%	Okanogan
Tacoma	2,152	1847	86%	24	1%	60	3%	221	10%	Pierce
Colville	129	91	71%	5	4%	20	16%	13	10%	Stevens
Pateros	20	16	80%	0	0%	2	10%	2	10%	Okanogan
Rosalia	10	9	90%	0	0%	0	0%	1	10%	Whitman
Northshore	1,655	1432	87%	9	1%	55	3%	156	9%	King
Tonasket	75	66	88%	0	0%	2	3%	7	9%	Okanogan
Satsop	11	10	91%	0	0%	0	0%	1	9%	Grays Harbor
Tekoa	22	20	91%	0	0%	0	0%	2	9%	Whitman
Wilson Creek	11	9	82%	0	0%	1	9%	1	9%	Grant

School district	Enrolled	Fully vaccinated	%	Conditional	%	Exempt	%	Out of compliance	%	County
Pullman	239	211	88%	1	0%	7	3%	20	8%	Whitman
Coupeville	72	61	85%	1	1%	4	6%	6	8%	Island
Stevenson-Carson	61	53	87%	1	2%	2	3%	5	8%	Skamania
Raymond	37	32	86%	0	0%	2	5%	3	8%	Pacific
Puyallup	1,658	1429	86%	15	1%	80	5%	134	8%	Pierce
Quincy	239	219	92%	1	0%	0	0%	19	8%	Grant
West Valley (Spokane)	256	222	87%	4	2%	10	4%	20	8%	Spokane
Auburn	1,269	1071	84%	30	2%	70	6%	98	8%	King
Vashon Island	91	66	73%	7	8%	11	12%	7	8%	King
Centralia	262	231	88%	4	2%	7	3%	20	8%	Lewis
Tenino	79	65	82%	0	0%	8	10%	6	8%	Thurston
Onalaska	53	46	87%	1	2%	2	4%	4	8%	Lewis
Mukilteo	664	579	87%	9	1%	27	4%	49	7%	Snohomish
Zillah	95	86	91%	0	0%	2	2%	7	7%	Yakima
Toppenish	262	241	92%	1	0%	1	0%	19	7%	Yakima
Bridgeport	56	52	93%	0	0%	0	0%	4	7%	Douglas
Carbonado	14	12	86%	0	0%	1	7%	1	7%	Pierce
Chimacum	56	47	84%	2	4%	3	5%	4	7%	Jefferson
Kent	2,045	1775	87%	42	2%	84	4%	144	7%	King
Enumclaw	357	302	85%	5	1%	25	7%	25	7%	King
Clover Park	1,330	1205	91%	20	2%	16	1%	89	7%	Pierce
Lind	15	13	87%	0	0%	1	7%	1	7%	Adams
Riverview	15	12	80%	0	0%	2	13%	1	7%	King
Vancouver	1,679	1434	85%	45	3%	89	5%	111	7%	Clark
Mt. Vernon	516	440	85%	10	2%	32	6%	34	7%	Skagit
Chehalis	216	191	88%	2	1%	9	4%	14	6%	Lewis
Snohomish	474	413	87%	1	0%	30	6%	30	6%	Snohomish
La Center	112	96	86%	1	1%	8	7%	7	6%	Clark
Trout Lake	16	7	44%	0	0%	8	50%	1	6%	Klickitat
Edmonds	1,544	1340	87%	29	2%	80	5%	95	6%	Snohomish
Dieringer	135	122	90%	1	1%	4	3%	8	6%	Pierce
Tahoma	480	430	90%	3	1%	19	4%	28	6%	Pierce
North Kitsap	426	378	89%	5	1%	19	4%	24	6%	Kitsap
Monroe	378	334	88%	6	2%	17	4%	21	6%	Snohomish
Ferndale	254	212	83%	3	1%	25	10%	14	6%	Whatcom



School district	Enrolled	Fully vaccinated	%	Conditional	%	Exempt	%	Out of compliance	%	County
Rochester	183	166	91%	2	1%	5	3%	10	5%	Thurston
Marysville	808	701	87%	16	2%	47	6%	44	5%	Snohomish
Nine Mile Falls	92	79	86%	1	1%	7	8%	5	5%	Spokane
South Bend	38	34	89%	2	5%	0	0%	2	5%	Pacific
Mercer Island	269	244	91%	0	0%	11	4%	14	5%	King
Moses Lake	579	515	89%	8	1%	26	4%	30	5%	Grant
Southside Valley	20	17	85%	0	0%	2	10%	1	5%	Mason
Central Kitsap	20	14	70%	0	0%	5	25%	1	5%	Stevens
Central Kitsap	859	781	91%	11	1%	25	3%	42	5%	Kitsap
Conway	41	36	88%	0	0%	3	7%	2	5%	Skagit
Oakville	21	20	95%	0	0%	0	0%	1	5%	Grays Harbor
Tumwater	485	430	89%	4	1%	28	6%	23	5%	Thurston
Everett	1,637	1453	89%	16	1%	94	6%	77	5%	Snohomish
Snoqualmie Valley	506	454	90%	5	1%	24	5%	23	5%	King
Odessa	24	21	88%	0	0%	2	8%	1	4%	Lincoln
Pomeroy	24	21	88%	0	0%	2	8%	1	4%	Garfield
Port Angeles	272	231	85%	8	3%	22	8%	11	4%	Clallam
Riverside	77	68	88%	0	0%	6	8%	3	4%	Spokane
Brewster	80	75	94%	2	3%	0	0%	3	4%	Okanogan
Renton	1,259	1137	90%	22	2%	53	4%	47	4%	King
Darrington	27	22	81%	1	4%	3	11%	1	4%	Snohomish
Elma	110	100	91%	3	3%	3	3%	4	4%	Grays Harbor
Ritzville	28	24	86%	2	7%	1	4%	1	4%	Adams
Tukwila	224	195	87%	12	5%	9	4%	8	4%	King
Deer Park	146	124	85%	4	3%	13	9%	5	3%	Spokane
Walla Walla P.S.	387	356	92%	7	2%	11	3%	13	3%	Walla Walla
Wellpinit	30	29	97%	0	0%	0	0%	1	3%	Stevens
Longview	485	439	91%	9	2%	21	4%	16	3%	Cowlitz
Sumner	683	606	89%	14	2%	41	6%	22	3%	Pierce
Kennewick	1,450	1348	93%	11	1%	45	3%	46	3%	Benton
East Valley (Spokane)	321	270	84%	6	2%	35	11%	10	3%	Spokane

School district	Enrolled	Fully vaccinated	%	Conditional	%	Exempt	%	Out of compliance	%	County
Yakima	1,225	1161	95%	16	1%	19	2%	29	2%	Yakima
Mead	570	509	89%	5	1%	43	8%	13	2%	Spokane
Ephrata	176	165	94%	3	2%	4	2%	4	2%	Grant
West Valley (Yakima)	264	254	96%	3	1%	1	0%	6	2%	Yakima
North Mason	179	153	85%	11	6%	11	6%	4	2%	Mason
Spokane	2,494	2176	87%	72	3%	194	8%	55	2%	Spokane
East Valley (Yakima)	234	226	97%	1	0%	2	1%	5	2%	Yakima
Castle Rock	96	85	89%	5	5%	4	4%	2	2%	Cowlitz
Battle Ground	837	699	84%	23	3%	99	12%	16	2%	Clark
Bethel	1,448	1341	93%	27	2%	53	4%	27	2%	Pierce
Orting	191	174	91%	5	3%	9	5%	3	2%	Pierce
Othello	336	321	96%	7	2%	3	1%	5	1%	Adams
Bainbridge Island	212	194	92%	3	1%	12	6%	3	1%	Kitsap
Mt. Adams	71	68	96%	2	3%	0	0%	1	1%	Yakima
Peninsula	575	520	90%	13	2%	34	6%	8	1%	Pierce
Richland	952	907	95%	15	2%	17	2%	13	1%	Benton
Medical Lake	147	137	93%	1	1%	7	5%	2	1%	Spokane
Wapato	236	230	97%	2	1%	1	0%	3	1%	Yakima
Highland	79	75	95%	0	0%	3	4%	1	1%	Yakima
Naches Valley	82	77	94%	2	2%	2	2%	1	1%	Yakima
Eastmont	417	405	97%	1	0%	4	1%	5	1%	Douglas
Goldendale	84	68	81%	1	1%	14	17%	1	1%	Klickitat
Quillayute Valley	84	74	88%	1	1%	8	10%	1	1%	Clallam
Prosser	172	164	95%	4	2%	2	1%	2	1%	Benton
Aberdeen	178	155	87%	21	12%	0	0%	2	1%	Grays Harbor
Cashmere	114	110	96%	0	0%	3	3%	1	1%	Chelan
College Place	122	115	94%	1	1%	5	4%	1	1%	Walla Walla
Ridgefield	248	224	90%	3	1%	19	8%	2	1%	Clark
Pasco	1,374	1325	96%	15	1%	23	2%	11	1%	Franklin

School district	Enrolled	Fully vaccinated	%	Conditional	%	Exempt	%	Out of compliance	%	County
Kelso	388	364	94%	7	2%	14	4%	3	1%	Cowlitz
Shoreline	710	656	92%	8	1%	41	6%	5	1%	King
Fife	300	266	89%	8	3%	24	8%	2	1%	Pierce
Yelm	479	441	92%	7	1%	28	6%	3	1%	Thurston
Oak Harbor	508	478	94%	13	3%	14	3%	3	1%	Island
Woodland	173	153	88%	1	1%	18	10%	1	1%	Cowlitz
White River	360	313	87%	8	2%	37	10%	2	1%	Pierce
Washougal	217	195	90%	6	3%	15	7%	1	0%	Clark
South Kitsap	662	612	92%	18	3%	29	4%	3	0%	Kitsap
Camas	445	411	92%	1	0%	31	7%	2	0%	Clark
Sunnyside	461	458	99%	0	0%	1	0%	2	0%	Yakima
Issaquah	1,460	1378	94%	9	1%	67	5%	6	0%	King
Wenatchee	522	495	95%	5	1%	20	4%	2	0%	Chelan
Adna	39	36	92%	0	0%	3	8%	0	0%	Lewis
Anacortes	210	185	88%	9	4%	16	8%	0	0%	Skagit
Asotin-Anatone	33	30	91%	2	6%	1	3%	0	0%	Asotin
Bickleton	14	12	86%	1	7%	1	7%	0	0%	Klickitat
Cape Flattery	11	11	100%	0	0%	0	0%	0	0%	Clallam
Colfax	42	42	100%	0	0%	0	0%	0	0%	Whitman
Colton	13	13	100%	0	0%	0	0%	0	0%	Whitman
Evaline	10	8	80%	0	0%	2	20%	0	0%	Lewis
Freeman	45	40	89%	0	0%	5	11%	0	0%	Spokane
Green Mountain	15	13	87%	1	7%	1	7%	0	0%	Cowlitz
Kettle Falls	53	46	87%	4	8%	3	6%	0	0%	Stevens
Liberty	35	31	89%	2	6%	2	6%	0	0%	Spokane
Mabton	72	70	97%	1	1%	1	1%	0	0%	Yakima
Mossyrock	35	33	94%	1	3%	1	3%	0	0%	Lewis
Naselle-Grays River Valley	21	16	76%	3	14%	2	10%	0	0%	Pacific
Okanogan	83	78	94%	3	4%	2	2%	0	0%	Okanogan
Orondo	15	15	100%	0	0%	0	0%	0	0%	Douglas
Paterson	12	12	100%	0	0%	0	0%	0	0%	Benton
Pe Ell	26	23	88%	1	4%	2	8%	0	0%	Lewis

School district	Enrolled	Fully vaccinated	%	Conditional	%	Exempt	%	Out of compliance	%	County
Rearadan-Edwall	40	35	88%	0	0%	5	13%	0	0%	Lincoln
Sedro-Woolley	318	282	89%	24	8%	12	4%	0	0%	Skagit
Selkirk	22	20	91%	1	5%	1	5%	0	0%	Pend Oreille
Sprague	10	10	100%	0	0%	0	0%	0	0%	Lincoln
St. John	13	12	92%	0	0%	1	8%	0	0%	Whitman
Summit Valley	11	8	73%	0	0%	3	27%	0	0%	Stevens
Taholah	10	10	100%	0	0%	0	0%	0	0%	Grays Harbor
Touchet	11	11	100%	0	0%	0	0%	0	0%	Walla Walla
Union Gap	65	64	98%	1	2%	0	0%	0	0%	Yakima
Waitsburg	24	22	92%	1	4%	1	4%	0	0%	Walla Walla
Waterville	17	17	100%	0	0%	0	0%	0	0%	Douglas
Wilbur	20	17	85%	0	0%	3	15%	0	0%	Lincoln
Willapa Valley	30	27	90%	1	3%	2	7%	0	0%	Pacific

**Data for the following districts was not included in the DOH database or showed having zero kindergarten enrollment**

Bellingham	-	0	-	0	-	0	-	0	-	Whatcom
Crescent	-	0	-	0	-	0	-	0	-	Clallam
Dixie	-	0	-	0	-	0	-	0	-	Walla Walla
Entiat	-	0	-	0	-	0	-	0	-	Chelan
Finley	-	0	-	0	-	0	-	0	-	Benton
Grand Coulee Dam	-	0	-	0	-	0	-	0	-	Grant
Harrington	-	0	-	0	-	0	-	0	-	Lincoln
Index	-	0	-	0	-	0	-	0	-	Snohomish
Kalama	-	0	-	0	-	0	-	0	-	Cowlitz
Keller	-	0	-	0	-	0	-	0	-	Ferry
Klickitat	-	0	-	0	-	0	-	0	-	Klickitat
Lake Chelan	-	0	-	0	-	0	-	0	-	Chelan
Lamont	-	0	-	0	-	0	-	0	-	Whitman
Mansfield	-	0	-	0	-	0	-	0	-	Douglas
Manson	-	0	-	0	-	0	-	0	-	Chelan
Mill A	-	0	-	0	-	0	-	0	-	Skamania
Napavine	-	0	-	0	-	0	-	0	-	Lewis
Nespelem	-	0	-	0	-	0	-	0	-	Okanogan

School district	Enrolled	Fully vaccinated	%	Conditional	%	Exempt	%	Out of compliance	%	County
Palouse	-	0	-	0	-	0	-	0	-	Whitman
Royal	-	0	-	0	-	0	-	0	-	Grant
Sequim	-	0	-	0	-	0	-	0	-	Clallam
Shaw Island	-	0	-	0	-	0	-	0	-	San Juan
Skamania	-	0	-	0	-	0	-	0	-	Skamania
Starbuck	-	0	-	0	-	0	-	0	-	Columbia
Stehekin	-	0	-	0	-	0	-	0	-	Chelan
Toledo	-	0	-	0	-	0	-	0	-	Lewis
University Place	-	0	-	0	-	0	-	0	-	Pierce
Wahluke	-	0	-	0	-	0	-	0	-	Grant
Winlock	-	0	-	0	-	0	-	0	-	Lewis

Source: Auditor prepared based on self-reported data found in the 2017-2018 kindergarten immunization status report compiled by DOH.

### School districts with less than 10 kindergarten students

*These districts were included in our analysis; the data is suppressed to protect student privacy*

Almira	Endicott	Onion Creek
Benge	Evergreen (Stevens)	Orchard Prairie
Blaine	Garfield	Orient
Boistfort	Glenwood	Palisades
Brinnon	Great Northern	Queets-Clearwater
Cascade	Kahlotus	Roosevelt
Centerville	LaCrosse	Skykomish
Columbia (Stevens)	Mary M. Knity	Star
Creston	Mount Pleasant	Steptoe
Damman	North River	Washtucna
Easton	Oakesdale	Wishram

# Appendix F: Washington Kindergarten Out-of-Compliance Rates

The 2017-2018 kindergarten immunization status report is made up of data from public and private schools. The data was reported to the Department of Health by 12/31/2017. The student data is based on parent reports to schools and may not be verified by a healthcare provider. Furthermore, the reliability of this data is not assessed by the Department of Health. **Figure 5** highlights the reported enrollment and out of compliance rates for public and private schools. To review this data in its entirety and the disclaimers provided by DOH, see <https://www.doh.wa.gov/DataandStatisticalReports/HealthBehaviors/Immunization/SchoolReports/DataTables>

**Figure 5 – Kindergarten enrollment and out of compliance results**  
2017-2018 school reported data

School type	Reported enrollment	Reported out of compliance	Out of compliance rate
Private schools	6,842	378	6%
Public schools	76,212	6,233	8%
<b>Total</b>	<b>83,054</b>	<b>6,611</b>	<b>8%</b>

Source: Auditor prepared based on self-reported data found in the 2017-2018 DOH kindergarten student immunization status report.

# Appendix G: Compliance and Vaccination Resources for Schools and Districts

## Materials for schools and school districts

DOH webpage for all WA requirements, manuals and forms: [doh.wa.gov/CommunityandEnvironment/Schools/Immunization/SchoolStatusReporting%209](https://doh.wa.gov/CommunityandEnvironment/Schools/Immunization/SchoolStatusReporting%209)

Additional resources regarding school and child care immunization requirements and reporting: [doh.wa.gov/CommunityandEnvironment/Schools/Immunization](https://doh.wa.gov/CommunityandEnvironment/Schools/Immunization)

Certificate of immunization (CIS) status forms: [doh.wa.gov/CommunityandEnvironment/Schools/Immunization#cis](https://doh.wa.gov/CommunityandEnvironment/Schools/Immunization#cis)

How to generate a CIS for a student with vaccination information in the IIS system: [doh.wa.gov/Portals/1/Documents/Pubs/348-389-CIS-PrintingInstructions.pdf](https://doh.wa.gov/Portals/1/Documents/Pubs/348-389-CIS-PrintingInstructions.pdf)

Certification of exemption form: [doh.wa.gov/CommunityandEnvironment/Schools/Immunization#exempt](https://doh.wa.gov/CommunityandEnvironment/Schools/Immunization#exempt)

Conditional status FAQ: [doh.wa.gov/Portals/1/Documents/Pubs/348-679-ConditionalStatusFAQ.pdf](https://doh.wa.gov/Portals/1/Documents/Pubs/348-679-ConditionalStatusFAQ.pdf)

Templates for conditional status notice letter to parents: [doh.wa.gov/CommunityandEnvironment/Schools/Immunization#conditional](https://doh.wa.gov/CommunityandEnvironment/Schools/Immunization#conditional)

Templates for exclusion notice letter to parents: [doh.wa.gov/CommunityandEnvironment/Schools/Immunization#exclusion](https://doh.wa.gov/CommunityandEnvironment/Schools/Immunization#exclusion)

Washington State Immunization Information System (IIS) guidelines: [doh.wa.gov/ForPublicHealthandHealthcareProviders/HealthcareProfessionsandFacilities/DataReportingandRetrieval/ImmunizationInformationSystem](https://doh.wa.gov/ForPublicHealthandHealthcareProviders/HealthcareProfessionsandFacilities/DataReportingandRetrieval/ImmunizationInformationSystem)

Washington IIS School Module: [doh.wa.gov/schoolmodule](https://doh.wa.gov/schoolmodule)

Immunization records management toolkit: [immunitycommunitywa.org/school-toolkit/](https://immunitycommunitywa.org/school-toolkit/)

## Vaccination resources

2019-2020 immunization requirements matrix: [doh.wa.gov/Portals/1/Documents/Pubs/348-295-SchoolImmReqforParents2019-2020.pdf](https://doh.wa.gov/Portals/1/Documents/Pubs/348-295-SchoolImmReqforParents2019-2020.pdf)

Immunization comparison chart (U.S. and Mexico):  
[cdc.gov/vaccines/schedules/downloads/child/binational-schedule-pr.pdf](https://cdc.gov/vaccines/schedules/downloads/child/binational-schedule-pr.pdf)

Vaccination brochures and posters in other languages: [doh.wa.gov/YouandYourFamily/Immunization/FormsandPublications/OtherLanguage](https://doh.wa.gov/YouandYourFamily/Immunization/FormsandPublications/OtherLanguage)

Template letters to parents about MMR legal changes:  
[doh.wa.gov/CommunityandEnvironment/Schools/Immunization/ExemptionLawChange](https://doh.wa.gov/CommunityandEnvironment/Schools/Immunization/ExemptionLawChange)

Measles-specific informational flyers in 17 languages:  
[doh.wa.gov/YouandYourFamily/IllnessandDisease/Measles/Measles2019#MeaslesInformationFlyers](https://doh.wa.gov/YouandYourFamily/IllnessandDisease/Measles/Measles2019#MeaslesInformationFlyers)

King County Plain Talk about Childhood Immunizations guides for families: [kingcounty.gov/depts/health/communicable-diseases/immunization/child/plain-talk-about-childhood-immunizations.aspx](https://kingcounty.gov/depts/health/communicable-diseases/immunization/child/plain-talk-about-childhood-immunizations.aspx)

The School Nurse Corps: [k12.wa.us/policy-funding/student-health/school-nurse-corps](https://k12.wa.us/policy-funding/student-health/school-nurse-corps)

Setting up an on-campus vaccination site: [immunitycommunitywa.org/toolkit-for-schools-and-groups/](https://immunitycommunitywa.org/toolkit-for-schools-and-groups/)

## WSSDA model policies

The Washington State School Directors Association generates leading practices and policies for member schools and districts in Washington. It establishes best practices for compliance enforcement and for a variety of other issues that schools and districts face, and updates those practices in response to changes in state law. Visit its website for details: [wssda.org](https://wssda.org)



# Appendix H: Errata

On May 1, 2020, the Office of the Washington State Auditor revised this report to correct errors discovered after the report was issued. These changes are shown below.

**Pages 3-4** We changed the paragraphs under the “Washington does not know its true vaccination rate” section on pages 3-4 as follows:

**Original text:** “Out of 295 school districts in the state, schools in 29 school districts **did not report their immunization data or reported having zero kindergarten enrollment to** the Department of Health (DOH) in the audited school year, 2017-2018. For the purposes of this audit, we limited schools in these 295 school districts to traditional K-12 or “common school” settings and did not include private, charter, tribal or any other school types found in the state.

Of the schools **that did report**, DOH data showed that 8 percent of all kindergarteners lacked complete immunization or exemption records. But because of the number of districts and schools **that failed to report as required**, the actual percentage of kindergarteners lacking records statewide may be greater. Without complete and accurate information about children’s immunity status, officials may not be able to protect students and others should an outbreak of disease occur.”

**Revised text:** “**The Department of Health (DOH) database lacked immunization data or showed zero kindergarten enrollment for schools in 29 out of 295 school districts** in the state in the audited school year, 2017-2018. For the purposes of this audit, we limited schools in these 295 school districts to traditional K-12 or “common school” settings and did not include private, charter, tribal or any other school types found in the state.

Of the schools **whose data was included in the database**, DOH data showed that 8 percent of all kindergarteners lacked complete immunization or exemption records. But because of the number of districts and schools **whose data was not included in the database**, the actual percentage of kindergarteners lacking records statewide may be greater. Without complete and accurate information about children’s immunity status, officials may not be able to protect students and others should an outbreak of disease occur.”

**Page 6** We changed the last sentence in the second to last paragraph in the *State Auditor’s Conclusions* section on page 6 as follows:

**Original text:** “In addition to the difficulty some districts have with immunization records, **there are other districts that simply aren’t reporting their immunization data to DOH.**”

**Revised text:** “In addition to the difficulty some districts have with immunization records, **there are other districts that aren’t included in the immunization data compiled by DOH.**”

**Page 13** We changed the first paragraph in the *Answer in Brief* section on page 13 as follows:

**Original text:** “Washington does not know its true vaccination rate for two key reasons. First, **not all school districts reported their public school immunization data to the Department of Health (DOH) during** the 2017-18 school year. Second, 8 percent of all kindergarteners in **reporting** public schools lacked complete immunization or exemption documentation.”

**Revised text:** “Washington does not know its true vaccination rate for two key reasons. First, **the Department of Health’s (DOH) database lacks immunization data for public schools in several school districts** for the 2017-18 school year. Second, 8 percent of all kindergarteners **in public schools whose data is included in the DOH database** lacked complete immunization or exemption documentation.”

We changed the second sentence in the second paragraph in the “Washington does not know its true vaccination rate” section on page 13 as follows:

**Original text:** “However, DOH’s data itself is incomplete because **it is based on data reported by schools and not all schools comply by submitting their reports.**”

**Revised text:** “However, DOH’s data itself is incomplete because **it lacks immunization data for 29 school districts.**”

**Page 14** We changed the first sentence in the last paragraph in the “Washington does not know its true vaccination rate” section on page 14 as follows:

**Original text:** “When a district’s data is unavailable **for DOH’s analysis**, there is no way to identify vaccination rates or to identify if students are out of compliance.”

**Revised text:** “When a district’s data is unavailable **for analysis**, there is no way to identify vaccination rates or to identify if students are out of compliance.”

Page 14 We changed the heading near the top of page 14 as follows:

*Original text:* “Not all school districts reported their public school immunization data to DOH”

*Revised text:* “The Department of Health’s database includes public school immunization data for most school districts but not all”

We changed the first paragraph below this heading on page 14 as follows:

*Original text:* “Ninety percent of Washington’s 295 school districts (266 districts) reported student immunization data for kindergarteners for the 2017-2018 school year. However, 29 did not report or reported having no kindergarten students. Student enrollment data from the Office of Superintendent of Public Instruction shows that the majority of these districts do in fact have kindergarteners enrolled. Although we did not look into the reasons why these districts have either not reported the data or reported apparently contradictory information, incomplete data impedes the state’s ability to fully understand the completeness of its vaccination efforts. This understanding is critical, especially when assessing the risk and impacts of potential disease outbreaks in school districts and schools.”

*Revised text:* “Ninety percent of Washington’s 295 school districts (266 districts) have their student immunization data for kindergarteners for the 2017-2018 school year included in the database. The remaining 29 districts either lacked records in the database or were shown as having no kindergarten students. However, student enrollment data from the Office of Superintendent of Public Instruction shows that the majority of these districts do in fact have kindergarteners enrolled. Although we did not look into the reasons why the DOH database lacked data for these districts, incomplete data impedes the state’s ability to fully understand the completeness of its vaccination efforts. This understanding is critical, especially when assessing the risk and impacts of potential disease outbreaks in school districts and schools.”

We changed the last sentence of the third paragraph on page 14 as follows:

*Original text:* “Twenty-nine school districts, marked in white, reported having zero kindergarten enrollment or did not report to DOH.”

*Revised text:* “Twenty-nine school districts, marked in white, do not have their data in DOH database or are shown there as having zero kindergarten students.”

We changed the last bullet in the legend to Exhibit 6 on page 14 as follows:

*Original text:* “Districts that did not report or had no kindergarten enrollment”

*Revised text:* “Immunization data not included in DOH dataset”

- Page 15** We changed the heading at the top of page 15 as follows:
- Original text:** “Eight percent of all kindergarteners in public schools **that reported** in the 2017-2018 school year lacked complete immunization or exemption documents”
- Revised text:** “Eight percent of all kindergarteners in public schools **included in the DOH database** in the 2017-2018 school year lacked complete immunization or exemption documents”
- We changed the first sentence under that heading as follows:
- Original text:** “During the 2017-2018 school year, around 6,200 (8 percent) kindergartners in the public schools **that reported** were out of compliance with state requirements for immunization documents.”
- Revised text:** “During the 2017-2018 school year, around 6,200 (8 percent) kindergartners in the public schools **whose data is included in the DOH database** were out of compliance with state requirements for immunization documents.”
- Page 27** We changed the last sentence in the second-to-last paragraph of the *State Auditor’s Conclusion* section on page 21 as follows:
- Original text:** “In addition to the difficulty some districts have with immunization records, **there are other districts that simply aren’t reporting their immunization data to DOH.**”
- Revised text:** “In addition to the difficulty some districts have with immunization records, **there are other districts that aren’t included in the immunization data compiled by DOH.**”
- Page 52** We changed the first two paragraphs at the start of *Appendix E: School District Vaccination Rates* on page 32 as follows:
- Original text:** “Figure 4 tables list the immunization status **reported by** 262 school districts **to DOH**. Please note:
1. **Twenty-nine** districts either **reported** having no kindergarteners **or did not report kindergarten immunization data to DOH** for the 2017-2018 school year. **They** are included at the end of the tables.”
- Revised text:** “Figure 4 tables list the immunization status **of** 262 school districts **whose data is included in the DOH immunization database**. Please note:
1. **Data from 29** districts either **was not included in DOH immunization database or was shown as** having no kindergarteners for the 2017-2018 school year. **These districts** are included at the end of the tables.”
- Page 60** We changed table divider row in the middle of Figure 4 on 60 page as follows:
- Original text:** “**The** following districts **did not report vaccination data to DOH or reported** zero kindergarten enrollment.”
- Revised text:** “**Data for the** following districts **was not included in the DOH immunization database or showed having** zero kindergarten enrollment.”



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– Pat McCarthy, State Auditor

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