



SECTION: Local Program Operations 481
SUBJECT: IMMUNIZATION SCREENING & REFERRAL
PROTOCOL
DATE: April 9, 2004 (*Revised*)

POLICY: Local WIC programs shall screen WIC applicants and participants who are between three months of age and 24 months of age for immunization status and refer those who might be at risk for under-immunization.

PURPOSE: To ensure that infants and children served by WIC are screened for immunization status using a documented immunization history, and, if needed, referred for immunizations. The following minimum requirement does not replace more comprehensive immunization screening, assessment and referral activities already in place in any WIC agency. Local WIC programs have the option of screening children up to the age of 60 months.

RELEVANT REGULATIONS: ASM 01-56—Immunization Screening and Referral in WIC
Executive Memorandum of December 11, 2000

DEFINITIONS:	<i>Documented history</i>	A record (electronic or paper) in which actual vaccination dates are recorded. This may include a parent or caretaker's hand-held immunization record from the provider, an immunization registry, such as Oregon's ALERT, an automated data system, or a participant's chart or a copy of the record from the chart.
	<i>Minimum screening protocol</i>	The required procedures used to identify infants or children who might be at risk for under-immunization.
	<i>Immunization schedule</i>	Current schedule of immunization consistent with that recommended by Centers for Disease Control and Prevention (CDC).
	<i>ALERT</i>	Oregon's Statewide Immunization Registry
	<i>DTaP</i>	Diphtheria and tetanus toxoids and acellular pertussis.

PROCEDURES:

- WIC's role and responsibilities***
- 1.0 In immunization screening and referral, WIC's role is intended to enhance rather than substitute for existing immunization activities and on-going immunization program initiatives.
 - 1.1 Local programs will establish a procedure that identifies how staff will be trained.

IMMUNIZATION SCREENING & REFERRAL PROTOCOL, *cont.*

(WIC's role and responsibilities:)

Minimum screening protocol

Not WIC staff responsibilities

- 1.2 Immunization screening and referral procedures are **never** to be used as a condition of eligibility for any WIC services.
- 1.3 WIC programs are not required to comply with the requirement of this policy in service areas where National Immunization Survey data show that the immunization coverage rate in WIC children under age two years is $\geq 90\%$.
- 1.4 When scheduling WIC certification appointments for infants or children between ages three months and 24 months:
 - 1.4.1 Advise the parents or caretakers that immunization records are requested as part of the WIC health screening process.
 - 1.4.2 Explain the importance WIC places on making sure that infants and children are up-to-date on immunizations.
 - 1.4.3 **Assure applicants that immunization records are not required to obtain WIC benefits.**
 - 1.4.4 Explain to the parent or caretaker who chooses not to immunize their infant or child that WIC is required to request immunization records at each subsequent certification visit.
- 1.5 Screen the infant or child's immunization status at the initial certification and all subsequent certification visits for infants or children between ages three months and 24 months.
 - 1.5.1 Screening is not required at secondary nutrition education contacts unless the parent or caretaker requests screening at that contact.
 - 1.5.2 Screen immunization status by using a **documented** record. A documented record is a record (electronic or paper) on which actual vaccination dates are recorded. This may include:
 - a parent's hand-held immunization record from the provider;
 - an immunization registry, such as ALERT;
 - an automated data system; or
 - a participant's chart or a copy of the record from the chart.
- 2.0 This protocol is not meant to fully assess immunization status, but to allow WIC to effectively fulfill its role as an adjunct to health care by ensuring the infants and children served by WIC who are at risk for under-immunization are referred for appropriate care.

IMMUNIZATION SCREENING & REFERRAL PROTOCOL, *cont.*

(Not WIC staff responsibilities:)

- 2.1 WIC staff is **not** responsible for:
- Evaluating immunization records to determine **which** immunizations are needed.
 - Answering technical questions about immunizations.
 - Entering immunization data into computerized systems.
 - Collecting additional or updated immunization records.
 - Convincing parents or caretakers who refuse to immunize their infants or children why they should be immunized.
 - Interpreting immunization records that cannot be assessed using the minimum screening method described in ¶3.0.

Minimum screening method

- 3.0 When screening immunization status, local programs are only required to count the number of doses of DTaP (diphtheria and tetanus toxoids and acellular pertussis) vaccine received in relation to age according to the schedule below. DTaP is sometimes written as DTP.

- By three months of age, at least one dose of DTaP.
- By five months of age, at least two doses of DTaP.
- By seven months of age, at least three doses of DTaP.
- By 19 months of age, at least four doses of DTaP.

Referral

- 3.1 If the DTaP doses/age are not adequate or if staff cannot interpret the record, the local program will:

3.1.1 provide information on the recommended immunization schedule appropriate to the current age of the infant or child; and

3.1.2 refer the individual to immunization services, ideally to the infant or child's usual source of medical care, or to the health department immunization clinic.

- Local programs will make available referral information appropriate for their community.

- 3.2 If a documented immunization record is not provided by the parent or caretaker, the local program will:

3.2.1 provide information on the recommended immunization schedule appropriate to the current age of the infant or child;

3.2.2 provide referral for immunization services ideally to the infant or child's usual source of medical care or health department immunization clinic; **and**

3.2.3 encourage the individual to bring their infant or child's immunization record to the next certification visit.

IMMUNIZATION SCREENING & REFERRAL PROTOCOL, *cont.*

Refusal to immunize child

- 3.3 If the parent or caretaker has chosen **not** to immunize their infant or child, the local program will:
- 3.3.1 **assure the individual that immunization status does not affect their infant or child's eligibility for WIC services;**
 - 3.3.2 explain WIC's role in supporting immunization screening;
 - 3.3.3 refer to the child's medical provider for more information on immunizations; **and**
 - 3.3.4 advise the individual that WIC is required to request immunization records at each certification.

Staff training

- 4.0 All local WIC program staff who are responsible for screening immunizations and referring to immunization services will receive training. Local WIC program staff who screen and refer do not need to be a competent professional authority (CPA).
- 4.1 Local WIC coordinators will work with local immunization coordinators to provide staff training. Refer the staff responsible for these tasks to the training packet provided by the state WIC office.
- 4.1.1 The Oregon Department of Human Services, Immunization Program will be responsible for providing training materials to all local WIC programs.
 - 4.1.2 Local WIC programs with access to staff qualified to conduct immunization training may provide that training to WIC staff, as needed.
 - 4.1.3 Local WIC programs will establish a procedure to train new staff and provide updated information to staff.

Documentation

- 5.0 Documentation of immunization screening and referral is mandatory. WIC staff will adhere to the above **minimum screening and referral protocol** as a standard clinic procedure.
- 5.1 Document screening and referral in the child's record.
 - 5.2 If a parent or caretaker chooses not to immunize their infant or child, the local WIC program has the option of documenting the refusal in the child's record. ★

REFERENCES:

1. Immunization screening & referral training packet.

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