

# Texas School Nurse Webinar

February 16, 2022



**TEXAS**  
Health and Human  
Services

Texas Department of State  
Health Services

# DISCLAIMER

The information presented today is based on DSHS and CDC's recent guidance and MAY change.

February 16, 2022

# Agenda: DSHS Texas School Nurse Webinar

Section	Presented by
Welcome	Antonio Aragon
Texas Vaccine Trends	Carolyn Smith, MSN, RN
Let's Get Kids Caught Up	Merissa Daugherty, BSN, RN
Plan a School Vaccination Clinic	Jennifer Moore, BSN, RN
Coffee Table Talk	DSHS Subject Matter Experts
Live Q&A	DSHS Subject Matter Experts
Final Notes	



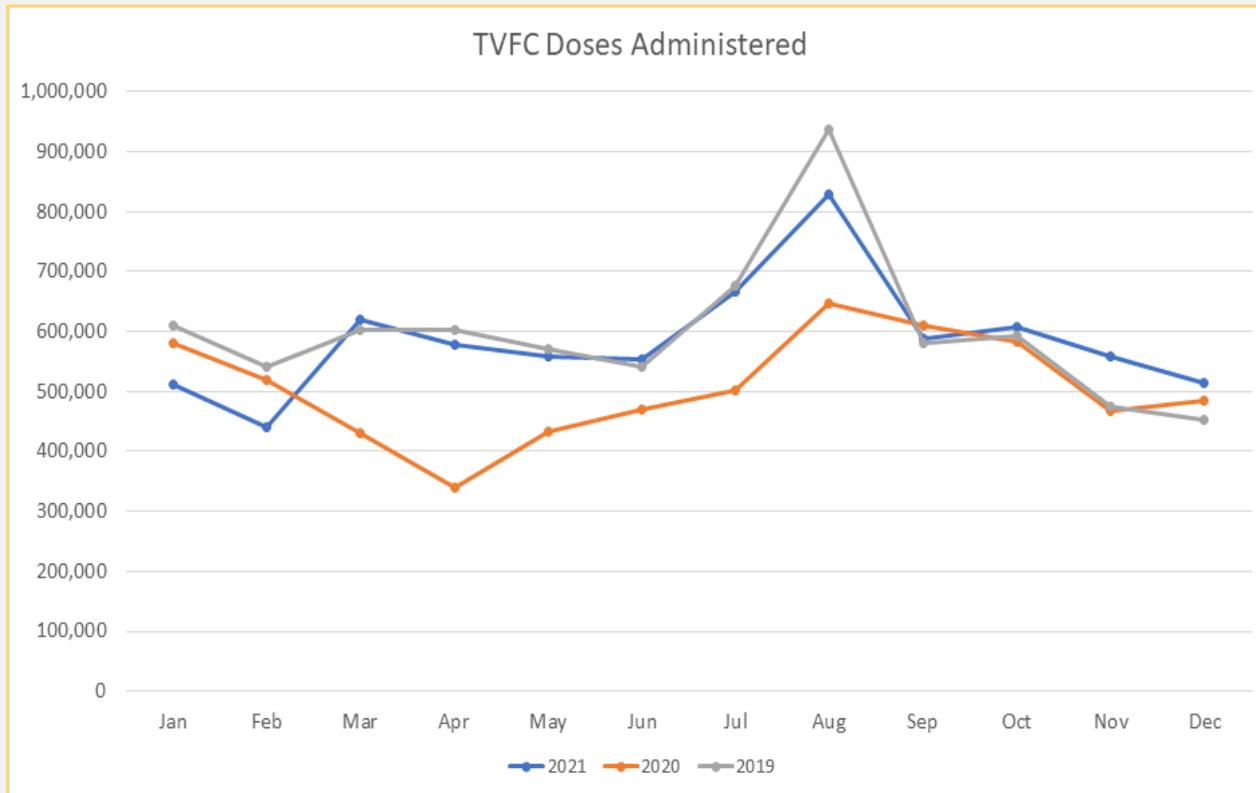
# Opening Remarks

Tony Aragon, MS

Director, Immunization Section

# Drop in Vaccines

## TVFC Provider Impact of COVID-19



**CDC's public sector vaccine ordering data show a 14% drop in 2020-2021 compared to 2019, and measles vaccine is down by more than 20%.**

# Texas Vaccines For Children (TFVC)

## Vision, Mission & Goals



### **Vision**

A Texas free of vaccine-preventable diseases.

### **Mission**

To remove barriers to complete and timely vaccination, increase vaccine coverage levels, and reduce the burden of vaccine-preventable diseases for all Texas infants, children, adolescents, and adults.

### **Goals**

Eliminate vaccine cost as a barrier to immunizations; reduce the need for referrals by private providers to public clinics through keeping children in their “medical home” for comprehensive health care; and provide a vaccine delivery system that is both efficient and effective for public and private providers

# Audience Poll

Does your school provide vaccines on-site or through a partnership?

Yes

No

# Texas Vaccine Trends

Carolyn Smith, MSN, RN



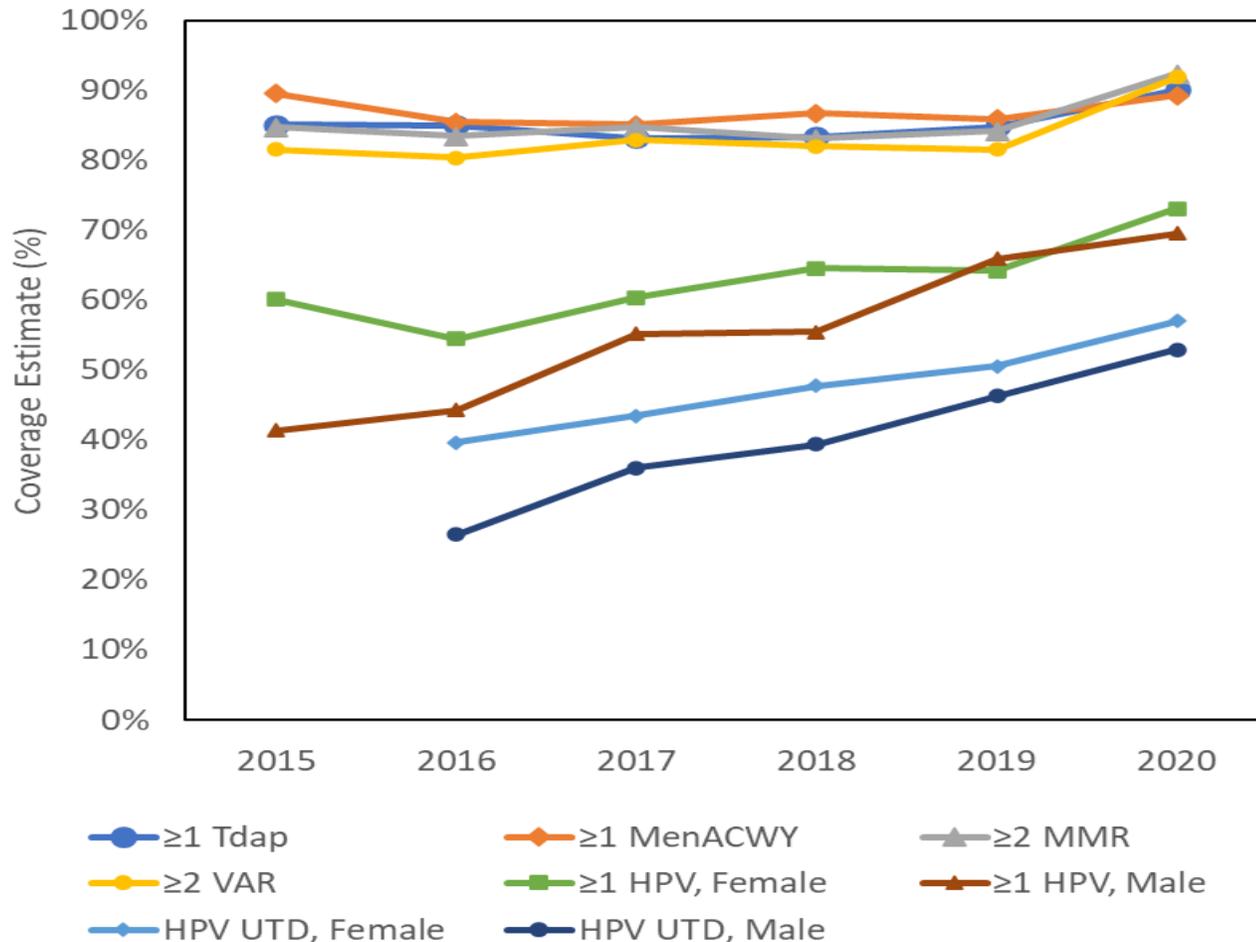
# Texas Population Estimate – 2019

(Children 0-18 years)

	Population	Percent of Total Population
1. The number of children enrolled in Medicaid	3,019,202	36.56%
2. The number of American Indian/Alaska Native children	147,719	1.79%
3. The number of children without health insurance (uninsured)	795,723	9.64%
<b>Underinsured and VFC Eligible</b>		
4. Federally Qualified Health Centers/Rural Health Centers	149,538	1.81%
5. Delegated Authority (DSHS Public Health Regions and Local Health Departments)	3,074	0.04%
<b>Sub-total FEDERAL VFC Eligible Children</b>	<b>4,115,256</b>	<b>49.83%</b>
6. The number of children Underinsured in the private sector*	57,120	0.69%
7. The number of children with the Children's Health Insurance Program (CHIP)*	405,372	4.91%
8. The number of children privately insured	3,680,370	44.57%
<b>Sub-total NON-FEDERAL VFC Eligible</b>	<b>4,142,862</b>	<b>50.17%</b>
<b>Total Texas Population (0-18 years)</b>	<b>8,258,118</b>	<b>100%</b>

# National Immunization Survey (NIS) – Teen 2020

13-17 years



Vaccination coverage in Texas significantly increased from 2019 to 2020 for five vaccines:

- HPV UTD
- $\geq 1$  HPV
- $\geq 2$  Hep. A
- $\geq 2$  Varicella
- $\geq 1$  Meningitis

# National Immunization Survey (NIS) – Teen 2020

13-17 years

Vaccine	U.S. 2020	Texas 2019	Texas 2020	Texas Percentage Point Difference
≥1 dose of Tdap	90.1%	84.8%	84% <sup>a</sup>	-0.8%
≥1 dose of MenACWY	89.3%	85.9%	91.2%	5.3% <sup>b</sup>
≥1 dose of HPV	75.1%	65.1%	72.8%	7.7% <sup>b</sup>
HPV Up-To-Date (HPV UTD)	58.6%	48.4%	54.9%	6.5% <sup>b</sup>
≥1 dose of HPV, females	77.1%	64.2%	76.1%	11.9% <sup>b</sup>
HPV UTD, females	61.4%	50.6%	57.0%	6.4%
≥1 of HPV, males	73.1%	65.8%	69.6%	3.8%
HPV UTD, males	56.0%	46.3%	52.9%	6.6%
≥2 doses of MMR	92.4%	84.2%	85.9% <sup>a</sup>	1.7%
≥2 doses of VAR	91.9%	81.6%	86.7% <sup>a</sup>	5.1% <sup>b</sup>
≥2 HepA	82.1%	81.4%	87.1% <sup>a</sup>	5.7% <sup>b</sup>
<sup>a</sup> Significant difference (p<0.05) from U.S. estimate <sup>b</sup> Significant difference (p<0.05) between years				

Texas vaccine coverage was significantly more than U.S. estimates for ≥2 HepA

Texas vaccine coverage was significantly less than U.S. estimates for ≥1 Tdap, ≥1 MMR, and ≥2 VAR

# 2020-2021 Annual Report

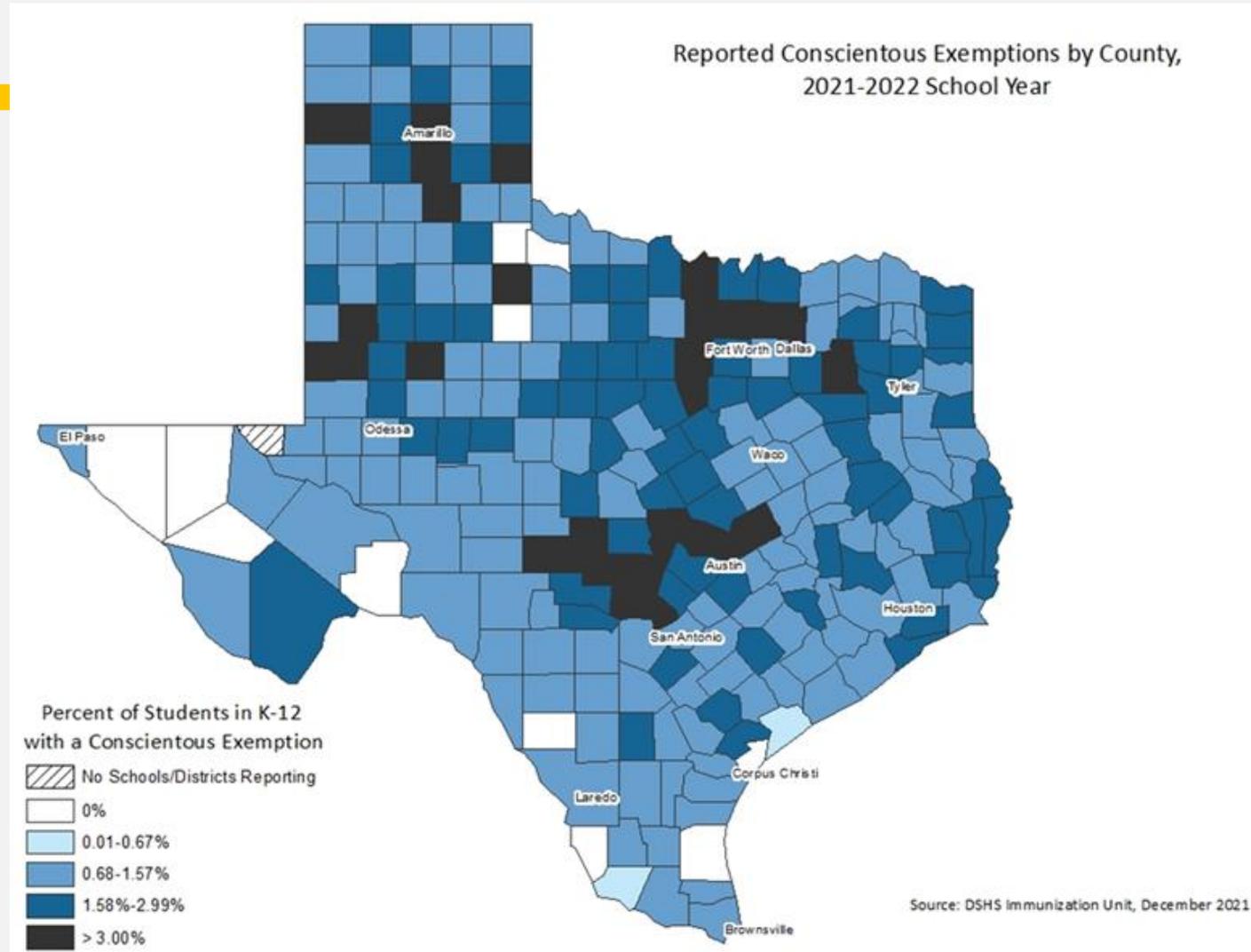
## Immunization Status - Texas

<b>Kindergarten</b>	<b>Completely Vaccinated</b>	<b>Conscientious Exemption</b>	<b>Medical Exempt.</b>	<b>Provisional Enrollment</b>	<b>Delinquent</b>
<b>DTP/DTaP/DT/Td</b>	95.06%	1.90%	0.09%	0.36%	2.59%
<b>Hepatitis A</b>	95.73%	1.80%	0.08%	0.55%	1.85%
<b>Hepatitis B</b>	96.68%	1.72%	0.06%	0.13%	1.41%
<b>MMR (2 doses)</b>	95.29%	1.92%	0.12%	0.14%	2.54%
<b>Polio</b>	95.20%	1.90%	0.08%	0.23%	2.59%
<b>Varicella (2 doses)</b>	94.98%	1.93%	0.13%	0.29%	2.67%
<b>7<sup>th</sup> Grade</b>					
<b>7<sup>th</sup> Grade</b>	<b>Completely Vaccinated</b>	<b>Conscientious Exemption</b>	<b>Medical Exempt.</b>	<b>Provisional Enrollment</b>	<b>Delinquent</b>
<b>Tdap</b>	91.34%	1.45%	0.07%	0.15%	7.00%
<b>Hepatitis A</b>	98.03%	1.03%	0.04%	0.17%	0.73%
<b>Hepatitis B</b>	98.29%	0.97%	0.03%	0.05%	0.65%
<b>Meningococcal</b>	91.15%	1.46%	0.07%	0.13%	7.18%
<b>MMR (2 doses)</b>	98.41%	0.95%	0.06%	0.04%	0.55%
<b>Polio</b>	98.19%	1.02%	0.04%	0.07%	0.68%
<b>Varicella (2 doses)</b>	98.10%	1.06%	0.10%	0.07%	0.68%

# 2020-2021 Annual Report

## Immunization Status - Texas

Of 5,367,490 K-12 students, 85,726 (1.6%) had a conscientious exemption for one or more vaccines.

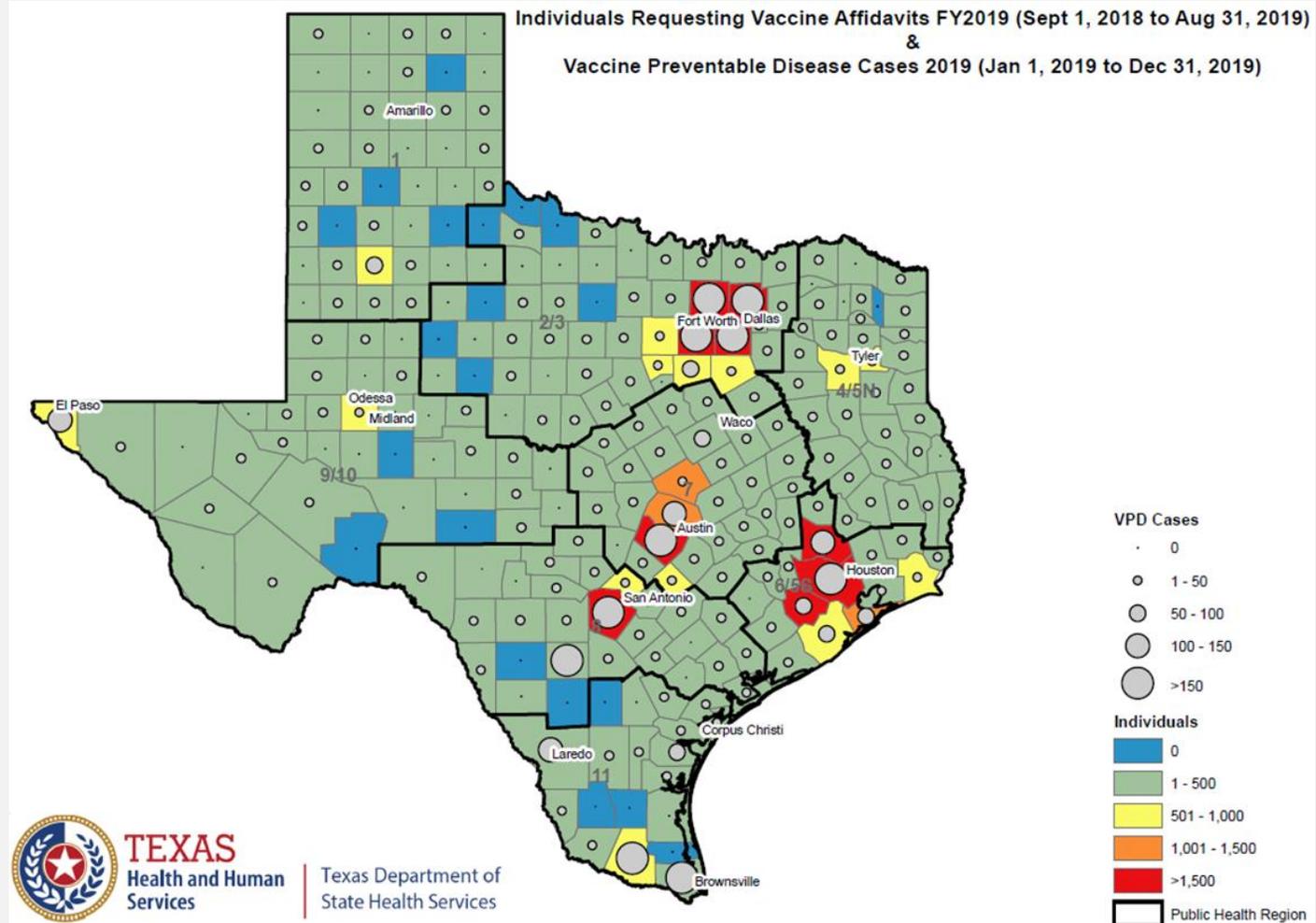


# Impacts to Health



# Exemptions vs. Vaccine-Preventable Disease

## Outbreaks Looming



# Barriers to Vaccination

Texas



- ❖ High uninsured percentage of 0-18 population
  - ❖ Lack of provider participation in TVFC Program
  - ❖ Complicated schedules
  - ❖ Missed opportunities
  - ❖ Vaccine cost (inventory) and reimbursement
  - ❖ Other Barriers (identified by NVAC)
    - Delays in scheduling appointments (recall system)
    - Lack of using benefits of registry (ImmTrac2)
    - Requiring a well-care visit
    - Long waiting periods in the office
    - Lack of culturally and age-appropriate educational materials
- 

# You are the Change!

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School nurses are:

- Enforcers of the law
- Sources of information
- Guiders of knowledge
- Builders of bridges
- Protectors of health in the community



# Enforcing Legal Codes

Guiding Texas Administrative Code (TAC):

Title 25, Part 1, Ch. 97, Subchapter B:

Immunization Requirements in Texas Elementary and Secondary Schools and Institutions of Higher Education



OFFICE of the SECRETARY of STATE

**Texas Administrative Code**

[TITLE 25](#) HEALTH SERVICES  
[PART 1](#) DEPARTMENT OF STATE HEALTH SERVICES  
[CHAPTER 97](#) COMMUNICABLE DISEASES  
[SUBCHAPTER B](#) IMMUNIZATION REQUIREMENTS IN TEXAS ELEMENTARY AND SECONDARY SCHOOLS AND INSTITUTIONS OF HIGHER EDUCATION

Rules

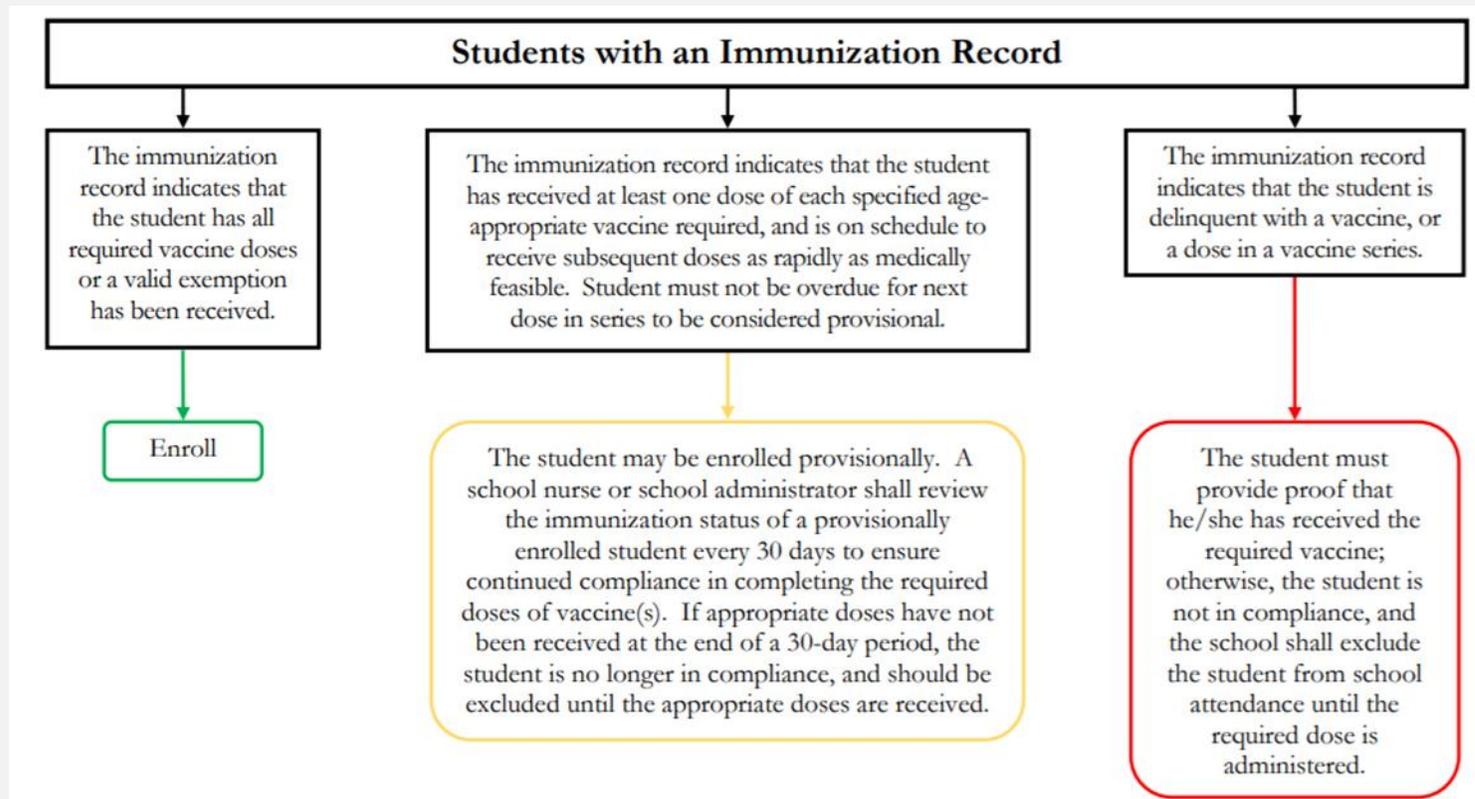
[§97.61](#) Children and Students Included in Vaccine Requirements  
[§97.62](#) Exclusions from Compliance  
[§97.63](#) Immunization Requirements in Child-care Facilities, Pre-Kindergarten, Early Childhood Programs, and Texas Elementary and Secondary Schools  
[§97.64](#) Required Vaccinations for Students Enrolled in Health-related and Veterinary Courses in Institutions of Higher Education  
[§97.65](#) Exceptions to Immunization Requirements (Verification of Immunity/History of Illness)  
[§97.66](#) Provisional Enrollment for (Non-Higher Education; Non-Veterinary) Students and Children  
[§97.67](#) School Records  
[§97.68](#) Acceptable Evidence of Vaccination(s)  
[§97.69](#) Transfer of Immunization Records  
[§97.70](#) Review of Records and Providing Assistance  
[§97.71](#) Annual Report of Immunization Status of Students  
[§97.72](#) Additional Vaccination Requirements

[HOME](#) [TEXAS REGISTER](#) [TEXAS ADMINISTRATIVE CODE](#) [OPEN MEETINGS](#)

[https://texreg.sos.state.tx.us/public/readtac\\$ext.ViewTAC?tac\\_view=5&ti=25&pt=1&ch=97&sch=B&rl=Y](https://texreg.sos.state.tx.us/public/readtac$ext.ViewTAC?tac_view=5&ti=25&pt=1&ch=97&sch=B&rl=Y)

# Enforcing Legal Codes

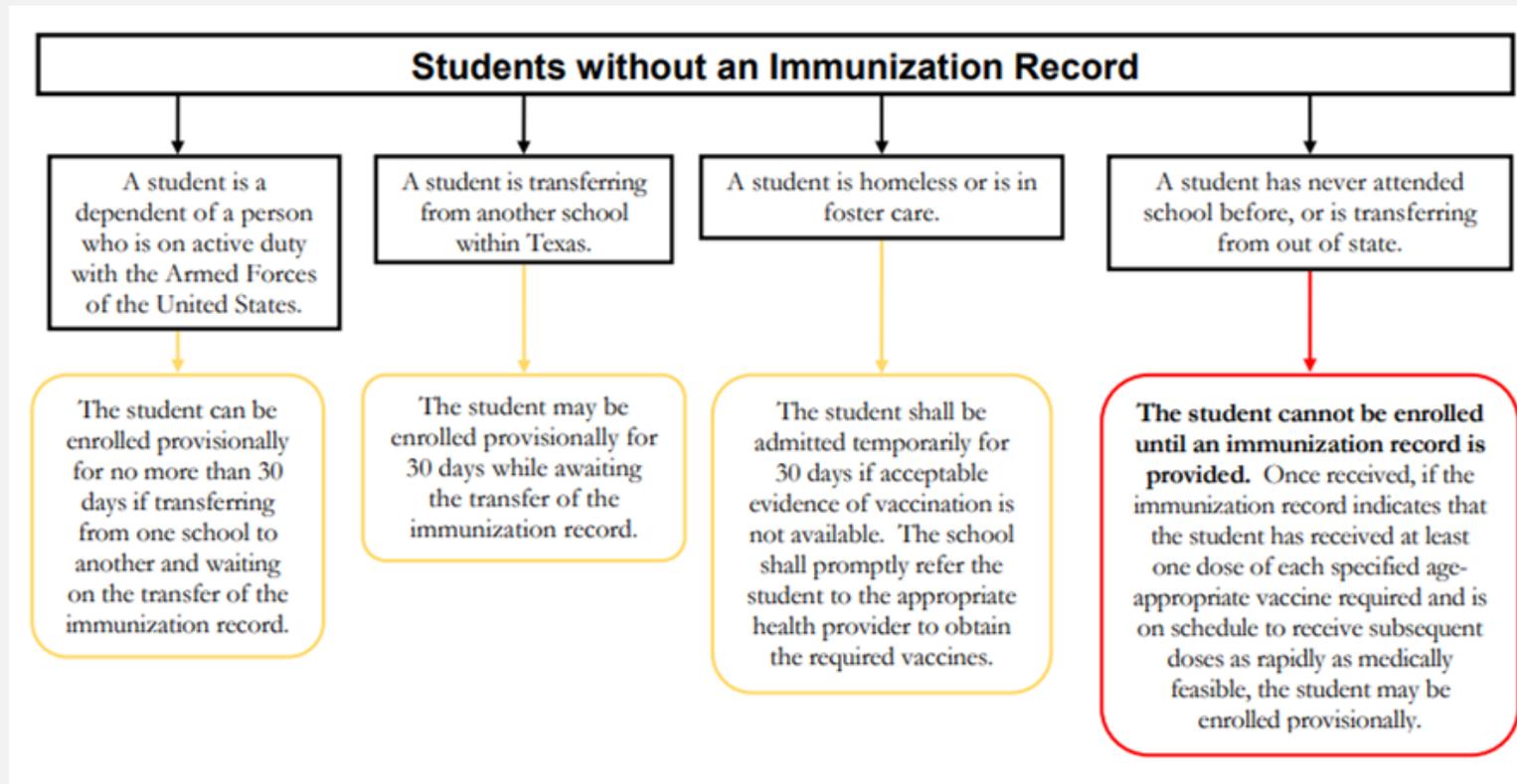
Know your provisional enrollment rules



<https://www.dshs.Texas.gov/immunize/docs/school/E11-13255.doc>

# Enforcing Legal Codes

Know your provisional enrollment rules



<https://www.dshs.Texas.gov/immunize/docs/school/E11-13255.doc>

# Contact Us



Help with policy interpretation, compliance, and implementation:

- DSHS Immunization
    - School Compliance Team
- Email: [Immunization General Inquiries](#)  
Phone: (800) 252-9152  
Fax: (512) 776-7288
- School District's Legal Department
- 

# School Vaccine Requirements

Merissa Daugherty, BSN, RN



# When are Vaccines Required?

Children may need specific immunizations to participate in certain activities and events. Educate your patients and their families on which vaccines are required for each of the following:

**Enrolling in child  
care / pre-K**



**Attending school  
(K-12)**



**Attending  
College/University  
or Technical  
Program**



# Child-Care Facilities

## 2021-2022 Immunization Requirements

Age at which child must have vaccines to be in compliance:	Minimum Number of Doses Required of Each Vaccine							
	Diphtheria / Tetanus / Pertussis (DTaP)	Polio	Hepatitis B (HepB) <sup>1</sup>	<i>Haemophilus influenzae</i> type b (Hib) <sup>2</sup>	Pneumococcal conjugate vaccine (PCV) <sup>3</sup>	Measles, Mumps, & Rubella (MMR) <sup>1,4</sup>	Varicella <sup>1,4,5</sup>	Hepatitis A (HepA) <sup>1,4</sup>
0 through 2 months								
By 3 months	1 Dose	1 Dose	1 Dose	1 Dose	1 Dose			
By 5 months	2 Doses	2 Doses	2 Doses	2 Doses	2 Doses			
By 7 months	3 Doses	2 Doses	2 Doses	2 Doses	3 Doses			
By 16 months	3 Doses	2 Doses	2 Doses	3 Doses	4 Doses	1 Dose	1 Dose	
By 19 months	4 Doses	3 Doses	3 Doses	3 Doses	4 Doses	1 Dose	1 Dose	
By 25 months	4 Doses	3 Doses	3 Doses	3 Doses	4 Doses	1 Dose	1 Dose	1 Dose
By 43 months	4 Doses	3 Doses	3 Doses	3 Doses	4 Doses	1 Dose	1 Dose	2 Doses

**Remember:** Administering multiple vaccines at the same time has been **proven to be safe**. For more information review the CDC's guidance for [Multiple Vaccines at Once](#) and [COVID-19 Vaccine coadministration](#).

This chart is not intended as a substitute for consulting the TAC, which has other provisions and details. The Department of State Health Services is granted authority to set immunization requirements by the [Human Resources Code, Chapter 42](#).

Download Chart [here](#)

# Schools K-12

## 2021-2022 Immunization Requirements

Vaccine Required (Attention to notes and footnotes)	Minimum Number of Doses Required by Grade Level												Notes	
	Grades K - 6th						Grade 7th	Grades 8th - 12th						
	K	1	2	3	4	5	6	7	8	9	10	11		12
Diphtheria/Tetanus/Pertussis (DTaP/DTP/DT/Td/Tdap)	5 doses or 4 doses						3 dose primary series and 1 booster dose of Tdap / Td within the last 5 years	3 dose primary series and 1 booster dose of Tdap / Td within the last 10 years						<p><b>For K – 6<sup>th</sup> grade:</b> 5 doses of diphtheria-tetanus-pertussis vaccine; 1 dose must have been received on or after the 4<sup>th</sup> birthday. However, 4 doses meet the requirement if the 4th dose was received on or after the 4<sup>th</sup> birthday.<sup>1</sup> For students aged 7 years and older, 3 doses meet the requirement if 1 dose was received on or after the 4<sup>th</sup> birthday.<sup>1</sup></p> <p><b>For 7<sup>th</sup> grade:</b> 1 dose of Tdap is required if at least 5 years have passed since the last dose of tetanus-containing vaccine.*</p> <p><b>For 8<sup>th</sup> – 12<sup>th</sup> grade:</b> 1 dose of Tdap is required when 10 years have passed since the last dose of tetanus-containing vaccine.*</p> <p>*Td is acceptable in place of Tdap if a medical contraindication to pertussis exists.</p>
Polio	4 doses or 3 doses												<p><b>For K – 12<sup>th</sup> grade:</b> 4 doses of polio; 1 dose must be received on or after the 4<sup>th</sup> birthday.<sup>1</sup> However, 3 doses meet the requirement if the 3<sup>rd</sup> dose was received on or after the 4<sup>th</sup> birthday.<sup>1</sup></p>	
Measles, Mumps, and Rubella <sup>2</sup> (MMR)	2 doses												<p><b>For K – 12<sup>th</sup> grade:</b> 2 doses are required, with the 1st dose received on or after the 1<sup>st</sup> birthday.<sup>1</sup> Students vaccinated prior to 2009 with 2 doses of measles and one dose each of rubella and mumps satisfy this requirement.</p>	
Hepatitis B <sup>2</sup>	3 doses												<p>For students aged 11 – 15 years, 2 doses meet the requirement if adult hepatitis B vaccine (Recombivax<sup>®</sup>) was received. Dosage (10 mcg /1.0 mL) and type of vaccine (Recombivax<sup>®</sup>) must be clearly documented. If Recombivax<sup>®</sup> was not the vaccine received, a 3-dose series is required.</p>	
Varicella <sup>2,3</sup>	2 doses												<p><b>For K – 12<sup>th</sup> grade:</b> 2 doses are required, with the 1st dose received on or after the 1<sup>st</sup> birthday.<sup>1</sup></p>	
Meningococcal (MCV4)							1 dose						<p><b>For 7<sup>th</sup> – 12<sup>th</sup> grade,</b> 1 dose of quadrivalent meningococcal conjugate vaccine is required on or after the student's 11<sup>th</sup> birthday. <b>NOTE:</b> If a student received the vaccine at 10 years of age, this will satisfy the requirement.</p>	
Hepatitis A <sup>2</sup>	2 doses												<p><b>For K – 12<sup>th</sup> grade:</b> 2 doses are required, with the 1st dose received on or after the 1<sup>st</sup> birthday.<sup>1</sup></p>	

**Remember:** Administering multiple vaccines at the same time has been **proven to be safe**. For more information review the CDC's guidance for [Multiple Vaccines at Once](#) and [COVID-19 Vaccine coadministration](#).

This chart is not intended as a substitute for consulting the TAC, which has other provisions and details. The Department of State Health Services is granted authority to set immunization requirements by the [Human Resources Code, Chapter 38](#).

Download Chart [here](#)

# College Entry

## 2021-2022 Immunization Requirements

Entering students **must show proof** of initial Meningococcal vaccination or a booster dose.

Healthcare and Veterinary students have **special immunization requirements** because of the higher risk of potential exposure in their coursework. See [here](#) for guidance.

Three ways to **show proof** of vaccination:



*Form with signature of  
physician with date of  
vaccination*



*Official immunization  
record from state or local  
health authority with date  
of vaccination*



*An official record received  
from school officials*

# Exemptions

## Exemption Information - School Immunizations

Texas law allows (a) physicians to write medical exemption statements which clearly state a medical reason exists and the person cannot receive specific vaccines, and (b) parents/guardians to choose an exemption from immunization requirements for reasons of conscience, including a religious belief.

**Exemption requests are processed in the order they are received.** Please be advised, it may take slightly longer than the standard 7-10 business days for an affidavit to arrive in the mail due to COVID-19.

Instructions for **parents** choosing the reasons of exemptions (Medical or Conscience/Religious) can be found on the [Exemption Information](#) webpage.

**Students attending community college or public junior college** may generate and print a conscientious exemption affidavit for the bacterial meningitis vaccine requirement online at the [Meningococcal Vaccination Exemption Website](#).

For further information on the exemption process, please review the [FAQ on Vaccine Exemptions for Reasons of Conscience](#).

The screenshot shows the Texas Department of State Health Services website. The header includes the Texas Health and Human Services logo and the text "Texas Department of State Health Services". A search bar is visible in the top right corner. The main navigation menu includes links for HOME, COVID-19, ABOUT DSHS, NEWS, I AM A..., MOST POPULAR, RESOURCES, ONLINE SERVICES, and CONTACT US. The page title is "Exemption Information - School Immunizations". A sidebar on the left contains a table of contents with links to Immunization Requirements, Frequently Asked Questions, Forms and Publications, Laws & Rules, Coverage Levels, Influenza Information, Contact this Program, and Search this Program. The main content area features a "Table of Contents" with links to Exemptions for Medical Reasons, Exclusions for Armed Forces Service Members, Requesting an Exemption for Reasons of Conscience, Obtaining an Affidavit, and Frequently Asked Questions. A paragraph of text below the table of contents states: "Texas Administrative Code (TAC) §97.62 describes the conditions under which individuals can seek exemptions from Texas immunization requirements. Exclusions from compliance are allowable on an individual basis for medical contraindications, active duty with the armed forces of the United States, and reasons of conscience, including a religious belief."

**There are four ways to obtaining an affidavit:**

1. **Online**
2. **By mail**
3. **Fax**
4. **In Person**

Visit [Exemption Information](#) for details.

# Be Proactive

- Send reminders to families about school immunization requirements
- Follow-up with families of children who are not in compliance and share compliance requirements
- Use the state's immunization information system's reminder-recall capacity to notify families whose children have fallen behind on vaccines

- Provide resources for families whose children have missed doses to get appointments scheduled
- Reassure families that precautions are in place for safe delivery of in-person services

## **We all should:**

- Communicate directly to families the importance of well-child visits and getting caught up on any recommended vaccines that were missed

# Become a TVFC Provider

## Did you know...

Texas leads the nation in the number of uninsured and under-insured children. Many of these children are not receiving the complete series of immunizations required to protect them from vaccine-preventable diseases. **Your participation in TVFC can help change this.**

If your school has standing delegated orders, from a licensed physician, talk with them about the benefits of enrolling in the Texas Vaccine For Children (TVFC) Program.

For more information:

 : [VacCallCenter@dshs.Texas.gov](mailto:VacCallCenter@dshs.Texas.gov)

 : 888-777-5320

# Plan a School Vaccination Clinic

Jennifer Moore, BSN, RN



# School-Located Vaccination (SLV)

What is it?

School-located vaccination clinics or nurses' stations may offer vaccination throughout the school day. With the right planning and communication, SLVs can be a part of a broader back-to-school effort by offering [routine childhood vaccination](#) and adult vaccines to staff, faculty, and families.



# School-Located Vaccination (SLV)

An opportunity to get children vaccinated

- ❑ Children are already present in schools
- ❑ More convenient for parents and guardians
- ❑ Offer routine vaccinations and catch-up vaccinations for students behind in vaccination because of the pandemic, including yearly influenza vaccination
- ❑ Administer COVID-19 vaccine rapidly and efficiently to eligible students and possibly their family members, teachers, school staff, and others in the community



***The White House recently announced a push for COVID-19 SLVs, calling on school districts nationwide to host at least one vaccination clinic over the coming weeks***

# Who can plan an SLV clinic?

If you're on this call...you can!

Pharmacies

Community Healthcare  
Clinics

Healthcare  
systems

**School Nurses can serve as the lead in planning an SLV:**

Pediatric practices

Staff from state and local public  
health departments

# Establishing SLV Leadership

## A critical initial step

It is essential to form partnerships with the school boards and to communicate with and gain the support of school principals and other school leaders.

Having support among school leadership can facilitate program implementation, increase student participation, and lead to more successful SLV clinics.

Find [customizable template communications](#) designed for school principals or other school leaders for SLV in general and for COVID-19 SLV specifically

## Customizable Content for School-Located Vaccination Clinics

Find customizable content to inform parents, school principals, and healthcare providers about the upcoming school-located vaccination clinic(s). Tailor the bolded text in brackets, as well as other text, as appropriate.

Communication to principals announcing SLV plans (not COVID-19 specific)	+
Communication to principals announcing COVID-19 SLV plans	+
Communication to parents announcing SLV clinic(s) (not COVID-19 specific)	+
Communication to parents stating whether the child was vaccinated or not (not COVID-19 specific)	+
Communication to healthcare providers announcing SLV plans (not COVID-19 specific)	+
Communication to parents informing about upcoming COVID-19 SLV clinic(s)	+
Communication to parents informing about upcoming 2nd dose COVID-19 SLV clinic	+
Communication to parents stating the child was vaccinated with COVID-19 vaccine (first dose)	+
Communication to parents stating the child was vaccinated with COVID-19 vaccine (second dose)	+
Communication to parents stating the child was NOT vaccinated with COVID-19 vaccine (first dose)	+
Communication to parents stating the child was NOT vaccinated with COVID-19 vaccine (second dose)	+
Communication to healthcare providers announcing COVID-19 SLV plans	+

# Considerations when planning an SLV

Start by considering the following...



Stage 1



## Is there:

...a local need?  
...sufficient resources and staff?  
...adequate community and stakeholder support?

Stage 2



- Which vaccine(s) will be offered?
- When will clinics be held?
- Will eligibility be expanded beyond enrolled students?
- Consider vaccine supply, potential for vaccine wastage, and logistical issues.



# Considerations when planning an SLV

## Stage 3



- ❑ Identify clinic staff.
- ❑ Plan for clinic space and design clinic layout.
- ❑ Schedule SLV clinics, including make-up clinics or clinics to administer subsequent doses for multi-dose vaccines, as applicable.
- ❑ Prepare [promotional and educational materials](#) to distribute to parents and students. If your school plans to include the COVID-19 Vaccine, included an Emergency Use Authorization (EUA) Fact Sheet or Vaccine Information Statement (VIS).

**Print Resources**

The following print-only materials are developed to support COVID-19 recommendations. All materials are free for download. They may be printed on a standard office printer, or you may use a commercial printer.

School Located Vaccine Clinics

Filter by Audience Filter by Topics

Filter by Content Type Clear

Found 5 items out of 262 total items. Date Descending

**School Located Vaccine Clinics: Get Back to Seeing Friends**

Use this poster featuring young adults hanging with their friends to promote School Located Vaccine Clinics.

Size: 11" W x 8.5" H

Alternative Language: [Spanish \(1 MB, 1 page\)](#)

Date: 6/16/21

Audience: [General Public](#), [Individuals & Consumers](#), [Parents & Caregivers](#)

Topics: [Schools](#), [Colleges & Universities](#), [K-12 Schools](#), [Vaccines](#)

Content Type: [Poster](#), [Print resource](#)

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Content Type: [Poster](#), [Print resource](#)

# Resources for planning SLV clinic

[Considerations for Planning School-Located Vaccination Clinics](#)

- [1. Vaccine Storage and Handling Resources,](#)
- [2. COVID-19 Vaccine Training Modules](#)
- [3. Vaccine Administration,](#)
- [4. Anaphylaxis after COVID-19 Vaccination,](#)
- [5. Vaccinating Adolescents](#)

[Guidance for Planning Vaccination Clinics Held at Satellite, Temporary, or Off-Site Locations | CDC](#)

[Back to School Toolkit](#)

[Guide to On Site Vaccination Clinic for Schools](#)

[White House communication regarding Kids Back to School](#)

[COVID-19 Vaccine Toolkit for Staff in School Settings and Childcare Programs | CDC](#)

[How Schools Can Support COVID-19 Vaccination](#)

# Audience Poll

True or False

**A school nurse could plan a SLV clinic?**



# Upcoming Webinar

Jennifer Moore, BSN, RN



**TEXAS**  
Health and Human  
Services

Texas Department of State  
Health Services

# ImmTrac2 Training

## Prepare for this Training

We will be hosting an ImmTrac2 user's webinar on March 3, 2022.

- Reminder Recall
- Printing Immunization records
- Printing Reports



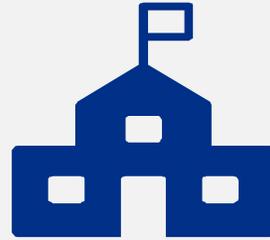
**9.1 million Texans' immunization records.  
33,000 organizations store them in 1 place.**

# Share the Benefits with Parents



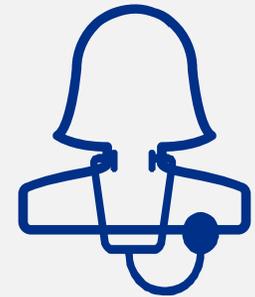
## Free and secure

There's no charge for enrolling and no monthly fee. The registry meets the highest security standards. Information is available only to doctors, schools, child-care centers, public health care providers.



## Schools can verify vaccine records

The clients will never have to round up immunization records themselves. Their child's school can access them and let them know what vaccines their child needs to meet school requirements.



## All doctors have access

No matter how many times they move or change health care providers, their child's immunization records are at any Texas doctor's fingertips.

# Obtaining a Vaccination History

**Patients can request a copy of their immunization history whenever for:**

- Child-care
- School
- College entrance
- Military enlistment
- Travel
- Employment in health and safety fields
- Other instances



Clients will need vaccine records for the rest of their life

# Audience Poll

Choose one

Which is NOT one of the mentioned benefits of ImmTrac2 enrollment?

- A) Free and no monthly charge
- B) Schools can verify vaccine records
- C) All doctors can access vaccine records
- D) Free Amazon prime account

# Coffee Talk – How I Recommend





“

How would you recommend the HPV vaccine to a parent for their 11–18-year-old?

”





“

How would you address a parent who has concerns about the safety of receiving vaccines?

”





“

What would you say to a parent who wants to delay or spread-out vaccines?

”





“

What would you recommend saying to a parent whose child has a CO that is expiring?

”



# Live Q&A



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# Final Notes



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# Take Our Survey!

***We want to hear from YOU!***

Take a moment to complete our post-webinar survey to give us feedback on the new webinar format and our webinar topics. You can also give us suggestions on what you want to hear about next!

Post Event Survey

Event Feedback

Thank you offering your feedback on the Texas DSHS School Nurse webinar! We'll strive to make future events even better!

1. What percentage of information was new to you? \*

0%      25%      50%      75%      100%

2. I can use the information provided... \*

Immediately

In 2-6 months

In 7-12 months

Never

3. Please rate each speaker's knowledge of the topics. \*

Knowledge

Carolyn Smith (Texas Vaccine Trends)	★ ★ ★ ★ ★
Merissa Daugherty (Getting Kids Caught Up)	★ ★ ★ ★ ★
Jennifer Moore (Planning a School Vaccination Clinic)	★ ★ ★ ★ ★

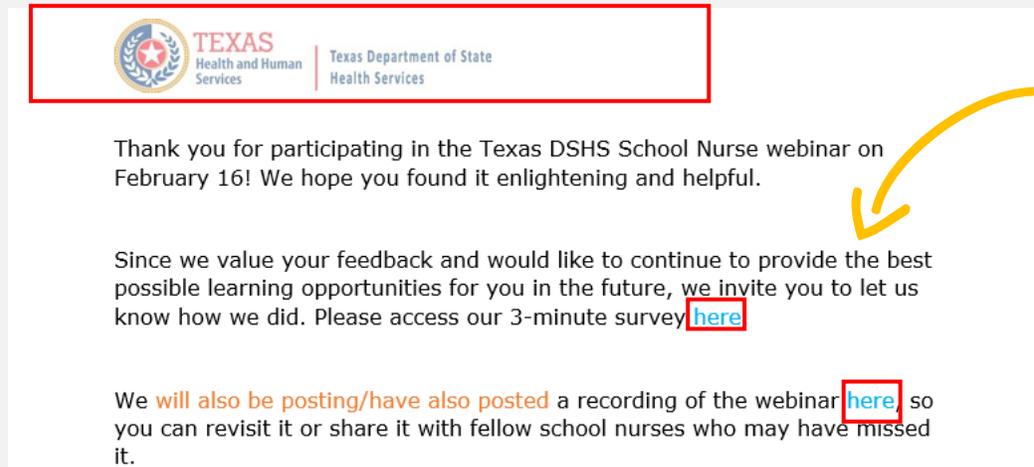
<https://survey.alchemer.com/s3/6739102/Post-Event-Survey>

# Look for Our Follow-Up Email!

Monitor your inbox for a follow-up email communication that contains a **post-webinar survey, a link to access today's webinar materials, and links to register for future webinars!**

The email also contains **helpful links and resources.**

The follow-up email will come from GovDelivery



Make sure to take our 3-minute survey!

This is where you can view today's (and past) webinars, as well as Highlights and the slides we presented.

# Thank You!



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