

The Washington State Department of Health, Office of Immunization and Child Profile (OICP), is conducting a statewide rollout of the Immunization Information System (IIS) School Module to public, private and charter schools. The School Module is part of our commitment to find solutions to make immunization work less of a burden on healthcare providers and schools. We would like to provide you with clarification on some frequently asked questions about the School Module.

For more information about the School Module or to access additional resources please visit our website at [www.doh.wa.gov/schoolmodule](http://www.doh.wa.gov/schoolmodule). If you have any additional questions that are not answered in this document, please send us an email at [schoolmodule@doh.wa.gov](mailto:schoolmodule@doh.wa.gov).

## General School Module

### **Q: What is the School Module?**

**A:** The School Module is a portal to the IIS that schools use for immunization tracking and reporting. School nurses and staff use it to access their students existing immunization records and enter medically verified historical immunizations that are missing in the IIS. The School Module allows the user to see school-specific information and reports. The goal of this system is to improve compliance rates with school immunization requirements and to keep children healthy and protected from vaccine-preventable diseases.

### **Q: Why should schools use the School Module?**

**A:** The School Module reduces the need for school staff to spend time entering immunization dates into a student information system that is separate from the IIS. It provides tools to quickly and accurately determine immunization compliance and identify vulnerable students during a disease outbreak. If immunization dates are missing in the IIS, a school nurse can enter medically verified immunization dates into the School Module, providing students with a complete lifetime immunization record. There are many more reasons why the School Module is beneficial for schools and public health. For more information, visit our School Module web page at [www.doh.wa.gov/schoolmodule](http://www.doh.wa.gov/schoolmodule).

### **Q: Which schools currently use the School Module?**

**A:** A regularly updated list of the private schools, charter schools, and school districts currently using the School Module can be found at our website at [www.doh.wa.gov/schoolmodule](http://www.doh.wa.gov/schoolmodule). The spreadsheet can be sorted by county/local health jurisdiction to see which schools are onboard in specific areas.

## For Healthcare Providers:

### **Q: How does this impact my work as a healthcare provider?**

**A:** As schools transition to using the School Module, healthcare providers may see an increase in requests to enter missing historical immunization dates into the IIS or requests for immunization records so school nurses can enter immunization dates that are missing in the IIS. Only medically verified immunization records may be entered in the School Module. In addition, schools may request that providers enter vaccine contraindications, such as evidence of immunity (titers) or disease history, in the IIS. Having complete immunization data in the IIS will benefit all users by providing a complete history when making immunization decisions for patients and preventing patients from receiving unnecessary vaccinations.



**Q: What are considered to be medically verified immunization records?**

**A:** School nurses are only allowed to enter medically verified immunization records into the School Module. Parent reported immunization dates may not be entered into the School Module. The decision to enter an immunization record is based on the school nurse’s clinical judgment of the record. The following are some examples of immunization records considered to be medically verified:

- A Certificate of Immunization Status (CIS) printed from the IIS or a CIS verified with a unique healthcare provider or clinic stamp, or handwritten provider signature
- Immunization records from a clinic or hospital electronic health record (EHR) with a unique healthcare provider, clinic, hospital stamp, or handwritten provider signature
- Official certificate of immunization or immunization record from another state’s immunization registry
- Official lifetime immunization record from Washington or another state with a unique healthcare provider or clinic stamp, or handwritten provider signature
- An immigration form or lifetime immunization record from another country with a clinic or healthcare provider stamp, or handwritten provider signature

**Q: How do I enter a contraindication to a vaccine in the IIS? How do I enter historical vaccinations?**

**A:** Some vaccine contraindications impact the IIS Vaccine Forecast, the Certificate of Immunization Status (CIS) and the School Module. It is important to enter contraindications so the Forecast, CIS, and School Module calculations are correct. Instructions on how to enter contraindications (evidence of immunity or disease history) can be found in the document “[Adverse Reactions and Contraindications](#)” available on the [IIS Training Materials](#) website.

We encourage providers to make it part of their practice to enter missing historical dates into the IIS for their patients. Instructions on entering historical vaccinations can be found in the document “[Adding Administered and Historical Vaccinations](#)” available on the [IIS Training Materials](#) website.

**Q: What is the best way to enter Chickenpox History in the IIS?**

**A:** History of Chickenpox disease can be entered by clicking the “Add Chickenpox History” button on the Vaccination View/Add page. Once entered, it is visible in the School Module and on the CIS.

**Q: Will school staff be able to see confidential patient information related to contraindications in the IIS?**

**A:** The details of contraindications entered in the IIS are only visible to the organization who entered them. A different organization (including a school) can see that there is a contraindication to a vaccine but not what the contraindication is. History of Chickenpox disease is visible in the School Module and on the CIS. Chickenpox history entered in the IIS meets the requirement for provider verification. In addition, demographic information such as address, phone number, etc. can only be seen by the organization that entered the information. This means schools cannot see provider entered demographic information and providers cannot see demographic information entered by a school.

### For Schools:

**Q: What type of report is available in the School Module to identify students who are at risk during an outbreak of a vaccine preventable disease?**

**A:** The 'At Risk' report lists students by grade who are "at risk" for a specific vaccine preventable disease. These are students who are *Out of Compliance* or *Conditional* or have an *Exemption* for the vaccine selected. The upgrade to the IIS, which is coming soon, contains a patch that will fix the current bugs in the 'At Risk' report and should soon be working properly. Stay Tuned!

**Q: What are some strategies school nurses can use to request medically verified immunization records?**

**A:** The ultimate decision to enter an immunization record is based on the school nurse's best clinical judgment. Here are a few best practices nurses can use:

- Contact the healthcare provider directly and ask the provider to enter the immunizations into IIS or fax an immunization record to the school.
- Ask the parent to request the provider enter the immunizations in the IIS.
- Ask the parent to obtain a medically verified record from a healthcare provider and the school nurse can enter the immunizations into the School Module.
- Send a [letter to parents](#) explaining the changes in immunization recordkeeping at your school.
- Send a memo to school staff, such as secretaries and IT personnel, about the School Module implementation and how it affects immunization management at your school.

If you have any questions about a medically verified record, please send an email to [schoolmodule@doh.wa.gov](mailto:schoolmodule@doh.wa.gov).

**Q: Once a district starts using the School Module do they need to continue to manage their student immunizations in their student information system?**

**A:** We recommend no longer tracking student immunizations in your student information system once the district starts using the School Module.

**Q: In the School Module only medically verified immunizations can be tracked. How do you track students who have parent verified immunizations?**

**A:** If you are unable to obtain a medically verified record, **do NOT enter the immunization dates into the School Module**. Use another method to track students who only have parent reported immunization records. For example you may want to make notes on a printed Action Report if a student is complete with parent reported immunizations, but medically verified records are needed to enter into the IIS.

**Q: Can staff other than the school nurse enter immunizations into the School Module?**

**A:** Only school nurses may enter immunization dates into the School Module, however school nurses can delegate this work to unlicensed assistive personnel (UAP). If you are interested in participating in delegation to UAP see the account set-up section of the School Module website [www.doh.wa.gov/SchoolModule](http://www.doh.wa.gov/SchoolModule).

**Q: How do you track students whose parents opt them out of the IIS?**

**A:** Very few parents opt their children out of the IIS. For those students you will need another method to track those students such as a file or document.

**Q: Can you track Certificates of Exemption through the School Module?**

**A:** Exemptions granted from completed Certificates of Exemption (COE) can and should be entered into the School Module. See the [School Module Training Guide](#) for instructions on how to add exemptions. Exemptions entered in the School Module are not visible to providers. Exemptions entered in the School Module do not impact the status of the Certificate of Immunization Status form (CIS). The incomplete CIS should have a status of Not Complete and the COE should be kept with the CIS.

**Q: I see that a student's previous school entered an exemption in the School Module. Is this sufficient documentation or do I need to have the Certificate of Exemption (COE) form?**

**A:** You must have the completed Certificate of Exemption on file at the school or child care. If the exemption is documented in the School Module and you don't have the COE remove the exemption from the School Module and contact the parents or the previous school and request a copy of the COE.

**Q: If a provider enters "parent or patient refusal" in the IIS can I accept that instead of a Certificate of Exemption?**

**A:** No, provider entered exemptions in the IIS are not the same as school exemptions. Provider exemptions mean that on that day the vaccine was offered and refused. They do not mean the parent is asking for a school exemption nor does it mean that a health care practitioner (MD, DO, ND, AP, ARNP) discussed the benefits and risks of vaccination. A Certificate of exemption is still needed to meet the exemption requirements. Once it is obtained it should be entered in the School Module.

**Q: What are some best practices to keep my roster up to date?**

**A:** Roster management is a necessary part of School Module work. It is important to develop and implement a roster maintenance plan.

- Review your student roster for accuracy as needed
- Add and remove students from the roster as they enroll and withdraw from your school
- Update address and phone numbers for students as needed
- Change the grades of the students on your school roster at the end of each school year
- If the student's name in the School Module is different than the school record, **DO NOT change the name**. Put the student's name from the school record in the "alias" field on the Demographic page
- If the date of birth is different, **DO NOT change the information**. Ask the parent to let the provider know that the provider needs to update the information in the IIS
- Assign a dedicated staff person at each school to keep the rosters up-to-date by adding and removing students as they enroll or leave the school
- Request an upload of your roster. Review and follow the steps included on the [Roster Upload Quick Reference Guide \(School Module\) \(PDF\)](#). The beginning of the school year is a great time to have us upload your roster since grades have changed and schools have a large movement of students moving in and going out of the school

**Q: Not all the schools in my school district want to use the School Module. Can one school utilize the School Module?**

**A:** Yes, a single school can use the School Module without the entire school district onboarding. However, the Information Sharing Agreement will still need to be signed by the superintendent. In addition, your annual report will not be able to be pulled through the School Module. The district will need to use the same reporting method for all schools within the district.

**Q: Will I be able to submit my annual school district immunization report through the School Module?**

**A:** Yes, if all schools in the district use the School Module the annual school immunization report is automatically pulled for private schools and school districts through the School Module. The School Module meets all of the state immunization reporting requirements for schools and child cares. No additional electronic record keeping is required for OSPI.

**Q: Will healthcare providers be able to see confidential student information in the IIS?**

**A:** Demographic information such as address, phone number, etc. can only be seen by someone with a School Module account. This means schools cannot see provider entered demographic information and providers cannot see demographic information entered by a school.

**Q: Can the WAIS exchange information with the Immunization Registries from other states?**

**A:** The WAIS can query the immunization records of a few other state's IIS such as Arizona and Idaho by using the Remote Registry feature. We are hoping to have exchange agreements with Oregon and other states in the future.