

CHILD CARE AND SCHOOL IMMUNIZATION AUDITS - FREQUENTLY ASKED QUESTIONS 2023-24 SCHOOL YEAR

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Table of Contents

2023-24 Child Care and School Immunization Requirements	3
General Audit Questions	3
Immunization Certificates	5
Licensed Child Care and Preschool Audits	8
Home School Students	9
Tdap Vaccine Requirement	10
Meningococcal Vaccine Requirement	11

2023-24 Child Care and School Immunization Requirements

- Q1: Has the COVID-19 vaccine been added as a required vaccine for school enrollment?

 A: No, the COVID-19 vaccine has not been added to the immunization requirements for students attending licensed child care, elementary and secondary schools.
- Q2: What if a student has not received all of the required vaccines prior to the start of school?

A: Students who have received at least one dose of each of the required immunizations may attend school by submitting a Provisional Certificate of Immunization. A provisional certificate is valid for 60 days and allows time for the child to receive additional vaccine doses. At the end of the provisional period, a Certificate of Immunization including all of the required vaccines must be submitted to the child care or school the child is enrolled or attempting to enroll.

Q3: During the 2023-24 school year if educational services are provided through online learning, e-learning, distance learning or virtual learning, will students still need to comply with school and child care requirements?

A: The lowa immunization requirements apply to all students enrolled in a licensed child care center or a public or nonpublic elementary or secondary school in lowa. Regardless of the means in which educational services are provided, all students are required to comply with lowa Administrative Code, Chapter 7. Consequently, students must meet immunization requirements to enroll in school regardless of classes being conducted in person or online attendance or be excluded from school. Applicants not presenting proper evidence of immunization, or an exemption, are not entitled to enrollment in a licensed child care center or elementary or secondary school under the provisions of lowa Code section 139A.8. It shall be the duty of the admitting official to deny enrollment to any applicant who does not submit proper evidence of immunization according to rule 641-7.6(139A) and to exclude a provisionally enrolled applicant in accordance with rule 641-7.7(139A).

General Audit Questions

Q1: When are school and child care audit reports due to the Department?

A: School audits should be completed and entered in IRIS by Friday, October 27, 2023. Child care audits, including preschools, should be completed and entered in IRIS by Friday, January 26, 2024.

Q2: When should school audits begin?

A: School audits should begin after the first day of school to allow additional time for local public health agencies to conduct audits. Local public health agencies may begin contacting schools and child care centers at any time to schedule the audit.

- Q3. Where should Local Public Health Agencies (LPHAs) conduct immunization audits?

 A: LPHAs should return to pre-pandemic practices regarding where to conduct audits. While some counties may have implemented the practice of removing records during the COVID-19 pandemic when there was limited access to school grounds and limited LPHA staffing, those issues should not affect the audit at this point. Additionally, removing original immunization certificates from the school to conduct the audit may raise confidentiality and other concerns.
- Q4: When conducting school immunization audits, do all student records need to be reviewed every year?

A: No, previously audited records do not need to be reviewed every year. Routinely, when Local Public Health Agencies (LPHAs) audit student records, the certificate is marked to indicate the record has been audited and meets immunization requirements. When this has occurred, the

record only needs to re-evaluated when vaccines are required for entry into additional grades (e.g., 7th grade - Tdap vaccine, 7th and 12th grade - Meningococcal vaccine).

Q5: If a child transfers from an lowa school to another lowa school, does their immunization record need to be re-audited?

A: If a student transfers from one lowa school to another, even if the schools are in different counties, records marked as previously audited by a local public health agency do not need to be audited again. The reviewer would only need to evaluate the record for compliance with immunization requirements for additional grades as necessary (e.g., Tdap and Meningococcal vaccine).

Q6: Does the immunization law allow for the 4-day "grace period"?

A: Since 2009, the law allows vaccine doses administered up to 4 days before the minimum interval or age to be counted as valid. The 4-day "grace period" should not be applied to the 28-day interval between two live virus vaccines (e.g., MMR and Varicella) if not administered at the same visit.

Q7: Who should conduct the audits? Can Head Start or school nurses conduct the audits? A: It is the duty of the local boards of health to audit the certificates of immunization, certificates of immunization exemption, and provisional certificates of immunization in the schools within their jurisdiction to determine compliance with lowa code. Head Start and school nurses can assist with preparing immunization records for the audits, but should not conduct the audits.

Q8: How long should Local Public Health Agencies maintain School and Child Care Immunization audit records?

A: Iowa HHS recommends maintaining audit documents for three years.

Q9: How do I audit certificates for homeless children and students per the McKinney-Vent Act?

A: These students should be audited like any other student. McKinney-Vento Act requires immediate enrollment, even if students are unable to produce immunization or other required health records, recognizing that families and youth who are homeless are frequently unable to obtain and keep copies of records [42 U.S.C. §1 I432(g)(3)(C)]. Additional information available from the lowardengeright Department of Education, McKinney-Vento Homeless Education Resources webpage.

Q10: After the audit, do LPHA staff need to re-audit provisional certificates to ensure students are immunized by the end of the 60 day provisional period or verify students with invalid or no certificate are compliant?

A: No, LPHA staff do not need to re-audit Provisional certificates or records for students with an invalid certificate or no certificate during the same school year. It is the duty of the admitting official to ensure a valid certificate is on file for each student in their schools (lowa Administrative Code (IAC 641-7.8(1)). It shall be the duty of the admitting official to deny enrollment to students who do not comply with requirements for proof of immunization or immunization exemption (IAC 641-7.10). All provisional certificates must be maintained by the admitting official until a certificate of immunization has been submitted (IAC 641-7.7(6)). At the end of a provisional enrollment period, if an enrollee has not submitted a certificate of immunization, the admitting official shall immediately exclude the applicant from the benefits, activities and opportunities of the school until the applicant submits a valid certificate of immunization (IAC 641-7.7(5)).

Immunization Certificates

Q1: What is the current version of the Certificate of Immunization?

A: The current version of the Certificate of Immunization is dated January 2013, and is available on the Immunization Program webpage. Certificates can be ordered on the Immunization Materials Order Form webpage.

Q2: What proof of immunization is required for enrollment in lowa schools?

A: In order to attend school or licensed child care, the child needs one of the following: a Certificate of Immunization, Provisional Certificate of Immunization, or Certificate of Immunization Exemption. A brief explanation of each certificate is included below.

- **Certificate of Immunization** Issued when applicant has a record of age-appropriate immunizations that meet the requirement for licensed child care or school enrollment.
- Provisional Certificate of Immunization Issued when the applicant has received at least one dose of each of the required vaccines but has not completed all required immunizations or is a transfer student from another U.S. school system.
- Certificate of Immunization Exemption Medical lowa law allows for medical
 exemption to immunization when required immunizations would be injurious to the
 health and well-being of the applicant or any member of the applicant's family or
 household or required vaccine would violate minimum interval spacing.
- Certificate of Immunization Exemption Religious lowa law allows for religious exemption to immunization when immunizations conflict with a genuine and sincere religious belief, and is not based merely on philosophical, scientific, moral, personal or medical opposition to immunizations.

More information regarding immunization certificates are available on the <u>Immunization Program webpage</u>.

Q3: Is an out of state certificate or exemption valid?

A: No, certificates from other states are not valid. In order to attend school or licensed child care, the child needs one of the following issued by the Iowa Department of Health and Human Services: Certificate of Immunization, Provisional Certificate of Immunization, or Certificate of Immunization Exemption.

Q4: Are previous versions of the immunization certificate valid or do students need the most current version of the certificate?

A: Previous versions of the immunization certificates remain valid and student records do not need to be updated when versions change. If a new student enrolling in school or child care for the first time submits a previous version of the Certificate of Immunization Exemption, the certificate is valid. Although the most current version of the certificate is preferred, it is not required.

Q5: Is the school nurse allowed to sign the Certificate of Immunization for students? A: Yes, school nurses are allowed to sign the Certificate of Immunization if the record indicates a child is up-to-date on all school entry immunization requirements.

Q6: A family has established care with a healthcare provider outside of Iowa. Are immunization certificates valid when signed by a healthcare provider who does not hold an Iowa license?

A: No, immunization certificates must be signed by the appropriate lowa licensed healthcare provider. For instances when healthcare providers are not licensed in lowa, the family may have a certificate signed by an lowa licensed healthcare provider in their current health system or have an appropriate healthcare provider in an lowa local public health agency sign the certificate.

Q7: Do immunization records from other immunization information systems or forms from other states count as the Certificate of Immunization?

A: To be valid, the certificate shall be the certificate of immunization issued by the lowa Department of Health and Human Services, a computer-generated copy from the immunization registry, or a certificate of immunization, which has been approved in writing by the department. The <u>Statement of Approval for Alternative Certificate of Immunization</u> outlines providers and clinics that meet the requirements of lowa Administrative Code.

Q8: Is a Certificate of Immunization Exemption for medical purposes valid when signed by a doctor of chiropractic?

A: No, a Certificate of Immunization Exemption for medical reasons is valid only when signed by an lowa licensed physician (M.D. or D.O.), physician assistant or nurse practitioner. The current Certificate of Immunization Exemption includes fields for the healthcare professional to print their name and lowa medical license number.

Q9: Can an Iowa licensed physician (M.D. or D.O.), physician assistant or advanced registered nurse practitioner sign the medical Certificate of Immunization Exemption for their own child?

A: An lowa licensed physician (M.D. or D.O.), physician assistant or advanced registered nurse practitioner (ARNP) may sign a medical exemption form for their child if the parent is a medical provider for their own child. The parent must have established a patient-provider relationship and completed documentation of treatment and assessment. Additionally, the child must fall within the health care provider's respective population foci.

Q10: What religions are acceptable for a religious exemption?

A: The lowa administrative code does not specify religious denominations eligible for a religious immunization exemption. A religious Certificate of Immunization Exemption is valid when completed appropriately and notarized. A religious exemption may be granted to a student if the immunization conflicts with a genuine and sincere religious belief and the belief is in fact religious and not based merely on philosophical, scientific, moral, personal, or medical opposition to immunizations.

Q11: Are Certificates of Immunization Exemption forms valid if the form has been altered?

A: The validity of the Immunization Exemption Certificates is based on language in Iowa Administrative Code, Chapter 7. Language which references code citation cannot be altered. Any edits or alterations to the Medical Certificate of Immunization Exemption or Religious Certificate of Immunization Exemption language referencing Iowa Administrative Code would result in the form being invalid. In order for a Certificate of Immunization Exemption to be valid, all portions of the form must be completed in its entirety.

Q12: Is a religious Certificate of Immunization Exemption valid when notarized by an out-of-state notary?

A: Yes, a religious Certificate of Immunization Exemption is valid when notarized by an out-of-state notary.

Q13: Who is allowed to sign the Religious Certificate of Immunization Exemption?

A: To be valid, the religious Certificate of Immunization Exemption requires the signature of the applicant or, if the applicant is a minor, the applicant's parent or guardian. Instances when the applicant is a minor and the Iowa Department of Health and Human Services is the guardian, documentation of guardianship must be obtained and attached to the Religious Certificate of Immunization Exemption. Without this documentation, the certificate of exemption is invalid.

Q14: Are photos or photocopies of exemptions acceptable?

A: Yes, photographs or photocopies of exemptions may be acceptable as long as all the fields are complete. Specific to Religious Certificates of Immunization Exemption, the auditor must be able to tell it was notarized.

Q15: The notary's commission on the Certificate of Immunization Exemption-Religious is now expired. Does the student need to submit a new certificate of immunization exemption?

A: No, a previously completed religious Certificate of Immunization Exemption with an expired notary commission remains valid for the student's entire enrollment period in an Iowa school as long as the commission was current upon the original date of signature. This situation applies when vaccines are required for entry into additional grades (e.g., 7th grade - Tdap vaccine, 7th and 12th grade - Meningococcal vaccine).

Q16: Can a notary, notarize the religious Certificate of Immunization Exemption for a relative?

A: The Immunization administrative rules does not address notary public regulations. However, information posted in a <u>Question and Answer</u> document on the Iowa Secretary of State's website includes the following: Pursuant to Iowa Code section 9B.4, a notary is prohibited from performing a notarial act with respect to a record the notary or notary's spouse is a party of or has a direct beneficial interest. Such a notarial act is voidable. For additional information contact the Secretary of State's office at 515-281-5204 or <u>sos@sos.iowa.gov</u>.

Q15: Is a foreign exchange student's host family able to sign a Certificate of Immunization Exemption-Religious?

A: Many host parents will have the authority to make decisions for treatment in a medical emergency. This does not allow authority for the host parents to sign or request a religious Certificate of Immunization Exemption. Please reference the following link for information from the US Bureau of Educational and Cultural Affairs Exchange Program.

Q16: Is a foreign exchange student's host parents the student's legal guardian?

A: No. The exchange student's natural parents remain legal guardians. The student's exchange program takes legal responsibility during the course of the program. Each exchange student's Certificate of Health contains a medical release form so host parents may secure medical treatment in case of an emergency. If the foreign exchange student requires additional immunizations to attend school, the host family or child should contact the foreign exchange student organization or the foreign exchange student's parents to obtain written consent.

Q17: Can a Provisional Certificate of Immunization be completed at the time of the audit? A: During the audit, a school nurse or local public health nurse may sign a Certificate of Immunization or issue a Provisional Certificate of Immunization. However, for audit purposes, certificates signed during the audit should not be counted as a valid immunization certificate.

Q18: Can a provisional enrollment be extended beyond 60 days?

A: The time allowed for provisional enrollment is as soon as medically feasible to complete the immunization requirements but shall not exceed 60 calendar days. Additional Provisional Certificates may be issued at the end of the 60-day provisional enrollment only if the applicant has not completed the required immunizations due to minimum interval requirements. The longest minimum interval between 2 doses of required vaccines for school enrollment is 6 months; therefore, it is generally unnecessary to have multiple provisional certificates issued for a single student. If a Certificate of Immunization is not submitted at the end of the 60-day provisional period, the child shall be excluded from the benefits, activities, and opportunities of the school or licensed child care center until a valid Certificate of Immunization is submitted.

Q19: Can a Provisional Certificate of Immunization be issued for immigrants, refugees, or foreign exchange students who have not received all required immunizations to attend school or licensed child care centers?

A: A Provisional Certificate of Immunization may be issued to a transfer student from another country if the student has received at least one dose of each of the required vaccines. If at least one dose of each vaccine is not on file for the applicant, the record shall be counted as invalid for auditing purposes. If the child does not have a valid certificate, they shall be excluded from the benefits, activities, and opportunities of the school until a valid Certificate of Immunization is submitted.

Q20: A transfer student's immunization record arrives at school during the provisional enrollment period and the student is missing required immunizations. Should the student be immediately excluded from school?

A: No, the student remains qualified for provisional enrollment until the expiration date of the provisional certificate. If a Certificate of Immunization is not submitted at the end of the 60-day provisional period, the child shall be excluded from the benefits, activities, and opportunities of the school until a valid Certificate of Immunization is submitted. If the student receives additional doses of each required vaccine during the provisional enrollment period and has at least one of each of the required vaccines, an additional Provisional Certificate of Immunization may be issued.

Q21: For international students without an immunization record but have laboratory confirmed immunity (titers), does the student still need to have documented vaccinations?

A: Per lowa Code, there are two instances when labs could be used in lieu of vaccinations:

Measles/Rubella: 2 doses of measles/rubella-containing vaccine; the first dose shall have been received on or after 12 months of age; the second dose shall have been received no less than 28 days after the first dose; or the applicant demonstrates a positive antibody test for measles and rubella from a U.S. laboratory.

Varicella: I dose received on or after 12 months of age if the applicant was born on or after September 15, 1997, but born on or before September 15, 2003, unless the applicant has had a reliable history of natural disease; or 2 doses received on or after 12 months of age if the applicant was born after September 15, 2003, unless the applicant has a reliable history of natural disease

Licensed Child Care and Preschool Audits

Q1: Where do I find a list of the licensed child care and preschool providers in my county?

A: A list of licensed childcare and preschool providers by county is available on the <u>lowa HHS</u> Provider Search website.

Q2: Which immunization requirements are used to audit a child's record who is attending a preschool program in a public or private school?

A: Children in preschool, regardless of their age, should be audited according to the <u>Licensed</u> <u>Child Care Center requirements</u>. The Kindergarten - I2th grade requirements do not apply until the child enters kindergarten.

Q3: Which immunization requirements are used to audit a child's record who is enrolled in a transitional, developmental or junior kindergarten program in a public or private school?

A: Children in transitional, developmental or junior kindergarten should be audited according to Licensed Child Care Center requirements. The lowa Immunization Administrative Code defines "elementary school" as kindergarten through grade 8. Other types of kindergarten programs such as transitional, developmental or junior kindergarten are not defined in administrative code by the Immunization Program or the Department of Education. These programs may include 4-year-old children who would not have adequate time to receive the required kindergarten vaccines prior to attending school and are audited according to Licensed Child Care Center requirements.

Q4: If school-age children attend an after school licensed child care program, does the licensed child care center need to have an immunization record on file?

A: Yes, the lowa Immunization Administrative Code requires a Certificate of Immunization be submitted to the licensed child care center in which the child wishes to enroll. An after school licensed child care center is required to have immunization records on file. The records should be audited according to the <u>Licensed Child Care Center requirements</u>.

Q5: Do children less than 12 months of age enrolled in a licensed child care center need a Certificate of Immunization on file if they have not completed the primary series of vaccines?

A: Yes, the lowa Immunization Administrative Code requires a Certificate of Immunization be submitted to the licensed child care center in which the child wishes to enroll. The Certificate of Immunization should be updated to meet the age-appropriate immunization requirements and as children receive additional immunizations.

Q6: Do infants enrolled in licensed child care under the age of four (4) months need a Certificate of Immunization on file for Iowa Immunization Requirements?

A: No, infants under four months of age are not counted in the audit and should not be included in the total enrollment number.

Q7: Can preschool students be issued a Provisional Certificate if they transfer from another US school?

A: The Provisional Certificate may be issued to a student enrolled in school or a child enrolled in licensed child care when the applicant has received at least one dose of each of the required vaccines but has not completed all the required immunizations. However, lowa Code specifies the definition of a transfer student as "an applicant seeking enrollment from one United States elementary or secondary school into another." The transfer definition as outlined in Code for Provisional Certificates is not applicable to preschool or licensed child care students.

Home School Students

QI: Do immunization records of a child receiving Competent Private Instruction (CPI) need to be audited?

An additional type of private instruction, **Independent Private Instruction (IPI)**, became effective on July 1, 2013. Children who are home -schooled under IPI are exempt from the immunization requirements. Immunization records for these children are not included in the audit, and the children are not counted in the Total Enrollment on the Immunization Record Review. For additional information see the <u>lowa Department of Education</u>, <u>Private Instruction</u> webpage or contact Buffy Campbell at the Department of Education, 515-954-8651.

Q2: During a school audit, where should records of home-schooled children be documented?

A. Home-schooled student records should be documented in the Home School row of the corresponding school where the immunization record is maintained (e.g., elementary school). If home-schooled student records are maintained at the school district office, an audit may be submitted for the school district office and would include records for home-schooled children only. IRIS includes a school district for each district in lowa in the School Name drop down menu. School districts should not be used to report audit data with the exception of home-schooled student records maintained at the school district office. Regardless of where home-schooled student records are documented for the audit, student records should only be counted in one location (e.g., school or school district office).

As of the 2013-14 school year, the Immunization Program began releasing individual school-level immunization audit data. The location of home-schooled children's records and where these records are documented during the immunization audit may impact individual school data. Rates for each type of certificate can impact individual school data. For example, if all home-schooled children for the school district are reported in one elementary school rather than throughout various schools within the district or in the school district office, and the majority of these students have an Immunization Exemption, the percentage of students with an immunization exemption will appear higher for this school and is a misrepresentation of audit data for the school.

Q3: If a home-schooled student has submitted immunization records upon initial enrollment in CPI, can a school nurse or auditor request an updated immunization certificate?

A: An immunization certificate is required only upon initial enrollment in CPI option I or Dual Enrollment. The lowa home-school regulations do not provide authorization to require updated immunization information beyond the first submission. Updates can be requested but are not required.

Tdap Vaccine Requirement

Q1: If a student already has a valid Medical or Religious Certificate of Immunization Exemption on file, is an updated certificate of exemption required for the Tdap or meningococcal vaccine requirements?

A: If a medical exemption form has no specific vaccines listed, it is valid for all vaccines and remains in effect until the expiration date noted on the form. If no expiration date is included, the medical exemption remains in effect for the student's entire enrollment period in an lowa licensed child care center, elementary and secondary school. If a medical exemption does not include diphtheria, tetanus and pertussis, or meningococcal vaccine, a new Certificate of Immunization Exemption form is required to include those antigens. The current version (January 2017) of the Medical Certificate of Immunization Exemption includes a section for the healthcare provider to select which required vaccine(s) the child is exempt from receiving.

A previously completed certificate for religious exemption is valid for all vaccines including Tdap and Meningococcal. The religious exemption remains in effect for the student's entire enrollment period in an lowa licensed child care center, elementary and secondary school.

Q2: What is the Tdap vaccine requirement?

A: Students entering, advancing or transferring into 7th grade or above, and born after September 15, 2000, need proof of an adolescent tetanus, diphtheria, and pertussis (whooping cough) booster immunization ("Tdap") for school enrollment. This dose must contain the pertussis component to be considered compliant with school entry requirements. A dose of Td (tetanus, diphtheria) does not meet this requirement.

Q3: Will all students born after September 15, 2000, need proof of Tdap vaccine or just 7th grade students?

A: Students entering 7th grade and above who were born after September 15, 2000, are required to have Tdap vaccine.

Q4: What if a child does not have proof of Tdap vaccine before school starts?

A: Children who have received one dose of pediatric diphtheria, tetanus, and pertussis (DTaP) vaccine may attend school by submitting a Provisional Certificate of Immunization. The Provisional Certificate of Immunization is valid for a maximum of 60 days, which allows time for the child to receive the adolescent Tdap vaccine. If the child does not receive the vaccine by the end of the provisional enrollment period (60 days), the child shall be excluded from school.

Q5: Is there a grace period or extension to receive Tdap vaccine after school starts?

A: No, there is no grace period/extension for the Tdap vaccine requirement. All students entering 7th grade and above who were born after September 15, 2000, need to submit a completed Certificate of Immunization with the Tdap immunization, a Certificate of Immunization Exemption or a Provisional Certificate of Immunization when enrolling in school.

Meningococcal Vaccine Requirement

Q1: What grades are included in the meningococcal vaccine requirement?

A: The meningococcal vaccine requirement has two parts.

- 1. All students entering, advancing or transferring into 7th grade and above and born after September 15, 2004, will need proof of one dose of meningococcal conjugate vaccine (MenACWY) received on or after 10 years of age. This requirement will generally apply to students in grades 7-11.
- 2. All students entering, advancing, or transferring into 12th grade and born after September 15, 1999, will need proof of two doses of MenACWY vaccine (I dose received on or after 10 years of age and I dose received on or after 16 years of age); or I dose if received when the student was 16 years of age or older.

Q2: Does the meningococcal requirement include meningitis B (MenB) vaccine?

A: No. The meningococcal vaccine requirement is only for meningococcal conjugate vaccine (MenACWY). Meningococcal serogroup B vaccines (MenB) do not provide protection against serogroup A, C, W, or Y disease. MenB vaccine does not meet the school meningococcal vaccine requirement.

Q3: Will all students born after September 15, 2004, need to have proof of meningococcal conjugate vaccine (MenACWY) or just 7th graders; the wording makes it sound as if perhaps it will be for grades 7-12?

A: The meningococcal requirement includes two parts:

- Students entering grades 7 and above, who were born after September 15, 2004, will
 be required to have proof of at least one dose of the MenACWY vaccine received on
 or after 10 years of age. This requirement will generally apply to students in grades 711. If a student entering 7th grade or above was born <u>before</u> September 15, 2004,
 s/he will not be not be affected by this requirement.
- Students entering 12th grade, who were born after September 15, 1999, will need
 proof of two doses of MenACWY vaccine (I dose received on or after 10 years of
 age and I dose received on or after 16 years of age); or I dose if received when the
 student was 16 years of age or older.

Q4: Should all adolescents receive a routine booster dose of meningococcal conjugate vaccine (MenACWY)?

A: Adolescents who receive the first dose of meningococcal between 10 and 16 years of age should receive a one-time booster dose, on or after 16 years of age. Adolescents who receive their first dose of meningococcal conjugate vaccine on or after age 16 years of age do not need a booster dose of vaccine.

Q5: If a student received meningococcal polysaccharide vaccine (MPSV4) at age 5 years (e.g., for international travel) and a dose of meningococcal conjugate vaccine (MenACWY) at age 11 or 12 years, will they still need a booster dose of MenACWY vaccine at age 16 years?

A: Yes. Any meningococcal vaccination given prior to the tenth birthday (either with MenACWY or MPSV4) does NOT meet the meningococcal vaccine requirement. To comply with the 12th grade requirement, students will need to receive the second dose of meningococcal vaccine on or after 16 years of age.

- Q6: What if a child does not have proof of the meningitis vaccine before school starts? A: A Certificate of Immunization that includes the meningococcal conjugate vaccine (MenACWY) must be submitted to the school where the child is enrolled or attempting to enroll. If the child has not received a dose of meningococcal conjugate vaccine (MenACWY) the child shall be excluded from the benefits, activities, and opportunities of the school until a valid Certificate of Immunization is submitted. For students enrolling in 12th who have only received one dose of meningococcal conjugate vaccine (MenACWY), prior to 16 years of age, may attend school by submitting a Provisional Certificate of Immunization. The Provisional Certificate of Immunization is valid for a maximum of 60 days which allows time for the child to receive the meningococcal conjugate vaccine (MenACWY). If the child does not receive the vaccine by the end of the provisional enrollment period (60 days), the child shall be excluded from school.
- Q7: Can students who have not received a meningococcal conjugate vaccine (MenACWY), be placed on a Provisional Certificate of Immunization?

 A: No, there is no grace period or extension for this requirement. All students entering 7th grade and above who were born after September 15, 2004, and 12th grade students born after September 15, 1999 will need to submit a completed Certificate of Immunization with the meningococcal conjugate vaccination (MenACWY). A Provisional Certificate of Immunization can only be issued when the applicant has received at least one dose of the required vaccine or is a transfer student from another U.S. school.

Q8: Is there a grace period or extension to receive the meningococcal vaccine after school starts?

A: No, there is no grace period or extension for this requirement. All students entering 7th grade and above who were born after September 15, 2004, will need to submit a completed Certificate of Immunization with the meningococcal conjugate vaccination (MenACWY), or a Certificate of Immunization Exemption before enrolling in school.

All 12th grade students born after September 15, 1999, will need to submit a completed Certificate of Immunization with the meningococcal conjugate vaccination (MenACWY), a Certificate of Provisional Enrollment or a Certificate of Immunization Exemption before enrolling in school.

Q9: Which vaccines meet the meningococcal vaccine requirement?

A: The lowa school entry requirement for immunizations follow the Advisory Committee on Immunization Practices (ACIP) recommendations. The ACIP recommends meningococcal (A, C, W, Y) vaccination for adolescents at age 11-12 years. The youngest age a dose of meningococcal vaccine may be given to satisfy lowa school entry requirements is 10 years of age. The CDC recommends the booster dose of meningococcal (A, C, W, Y) vaccine to be administered on or after 16 years of age. The brand names of meningococcal conjugate vaccines available in the U.S. that contain all four serogroups are Menactra, MenQuadfi, and Menveo. Any meningococcal vaccine administered that contained less than the four required serogroups (A, C, W, Y) does not count toward the school entry requirement.

Meningococcal B vaccines are recommended by the CDC for people 16-23 years of age with a preferred age of vaccination of 16-18 years as a shared clinical decision-making recommendation. Shared clinical decision making recommendations are individually based and informed by a decision process between the healthcare provider and the patient or parent/guardian. Meningococcal B vaccine doses do not count toward the school entry requirement. Brand names of meningococcal B vaccines licensed in the U.S. are Bexsero and Trumenba.

Q10: When looking at patient records in IRIS, some records include Meningococcal NOS vaccine. Does Meningococcal NOS vaccine meet the meningococcal vaccine school requirement?

A: Meningococcal, NOS is the default name for meningococcal A, C, W, Y vaccines in IRIS if no trade name is selected. If no trade name was entered into IRIS and only Meningococcal NOS is displayed, a healthcare provider can assume this was a dose of meningococcal A, C, W, Y vaccine and would meet the meningococcal vaccine school requirement.