Today’s Presenters

Katherine Graff BSN, RN
Immunization Nurse Consultant

Ashley McHugh
School Module Coordinator

Ariel VanZandt
School Module Coordinator

Washington State Department of Health
Office of Immunization and Child Profile
SCHOOL MODULE OVERVIEW
The School Module is a portal into the Washington State Immunization Information System (IIS) that allows schools to track and manage student and school-level immunization information.

**Goals of the School Module:**

- Improve school immunization compliance rates
- Increase the amount of immunization data in the IIS
- Improve the ability to identify under vaccinated or unvaccinated students
Relationship of the School Module to the Washington State IIS

**Healthcare Provider Access**
- View Records
- Print CIS
- Add/Edit records & contraindications
- Run clinic & patient reports

**School (View Only Access)**
- View Records
- Print CIS

**School Module Access**
- View Records
- Print CIS
- Add records
- Run school-specific reports & parent letters
School Module Rollout

Who is using the School Module?

- 27 public school districts
  - 200 public schools
- 7 private schools
- 3 charter schools
- 3 early learning programs

Additionally, 65 school districts or private schools are in the process of onboarding.

An updated list of schools using the School Module is on our website at [www.doh.wa.gov/schoolmodule](http://www.doh.wa.gov/schoolmodule).
Benefits of Using the School Module

- Access to the IIS that contains millions of immunization records already entered by healthcare providers
- Acts as a school immunization system for tracking and managing student immunizations and exemptions
- Saves staff time entering data and finding missing immunizations
- Frees up more time to work with students instead of time spent on record keeping
- Improves the ability to identify under or unvaccinated students
- Eliminates the need to submit the required annual immunization report
- Provides students with a lifetime record they can access wherever they go
- Supports healthy, well-vaccinated students
## Student Roster

Logged in: KATHERINE MICHELE GRAFF

Organization (IRMS): NORTHSHORE SCHOOL DISTRICT (1943)

Date: September 15, 2016

### School Roster

**School:** VERY HEALTHY ELEEMENTARY  
**Grade:** All

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Birthday</th>
<th>SIIS Patient ID</th>
<th>Status</th>
<th>Exemption on File?</th>
<th>Grade</th>
<th>Move To?</th>
<th>Remove?</th>
</tr>
</thead>
<tbody>
<tr>
<td>CAT</td>
<td>ALICE</td>
<td>12/01/2010</td>
<td>5260301</td>
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<tr>
<td>CAT</td>
<td>AUSTIN</td>
<td>10/12/2005</td>
<td>4727813</td>
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<td>▼</td>
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<tr>
<td>CAT</td>
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<td>09/12/2006</td>
<td>4999607</td>
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<td>▼</td>
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<tr>
<td>CAT</td>
<td>CARLY</td>
<td>11/12/2004</td>
<td>3989307</td>
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<td>▼</td>
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<td>COREY</td>
<td>10/12/2004</td>
<td>3958790</td>
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<tr>
<td>CAT</td>
<td>DAVID</td>
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<td>4885626</td>
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<tr>
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<td>6222571</td>
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<td>MARIE</td>
<td>12/12/2006</td>
<td>4930893</td>
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</tr>
<tr>
<td>CAT</td>
<td>MAX</td>
<td>11/15/2007</td>
<td>5257303</td>
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<td>Y</td>
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<td>--select--</td>
<td>▼</td>
</tr>
<tr>
<td>CAT</td>
<td>MIMI</td>
<td>09/12/2005</td>
<td>4828369</td>
<td>Past Due</td>
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<tr>
<td>CAT</td>
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<td>10/01/2010</td>
<td>5408455</td>
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<td>Kindergarten</td>
<td>--select--</td>
<td>▼</td>
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<tr>
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<td>MUFFIN</td>
<td>11/12/2005</td>
<td>4396196</td>
<td>Complete</td>
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<td>5th Grade</td>
<td>--select--</td>
<td>▼</td>
</tr>
<tr>
<td>CAT</td>
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<td>11/01/2009</td>
<td>5634817</td>
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<td>1st Grade</td>
<td>--select--</td>
<td>▼</td>
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<tr>
<td>CAT</td>
<td>PEACH</td>
<td>10/15/2007</td>
<td>5256709</td>
<td>Complete</td>
<td></td>
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<td>--select--</td>
<td>▼</td>
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<tr>
<td>CAT</td>
<td>PETER</td>
<td>09/15/2007</td>
<td>5256379</td>
<td>Past Due</td>
<td></td>
<td>3rd Grade</td>
<td>--select--</td>
<td>▼</td>
</tr>
</tbody>
</table>
**Demographics**

Logged in: ARIEL VANZANDT
Organization (IRMIS): VERY HEALTHY SCHOOL DISTRICT (911116)

<table>
<thead>
<tr>
<th>Record Info</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>SIIS Patient ID:</td>
<td>0332649</td>
</tr>
<tr>
<td>Organization (IRMIS)</td>
<td>Owner</td>
</tr>
<tr>
<td>Facility Owner:</td>
<td>-</td>
</tr>
<tr>
<td>Entry Date:</td>
<td>07/06/2018 12:21:23 PM</td>
</tr>
<tr>
<td>Entered By:</td>
<td>KATHERINE GRAFF</td>
</tr>
<tr>
<td>Last Update:</td>
<td>09/20/2018 11:12:37 AM</td>
</tr>
<tr>
<td>Last Updated By:</td>
<td>ARIEL VANZANDT</td>
</tr>
</tbody>
</table>

**Patient Demographics**

**Patient Status:** Inactive

**Patient**

- First Name: RAJ
- Middle Name: (K) COMP
- Last Name: CAT
- Suffix: 
- Birth Date: 10/01/2012
- Birth Time: 
- Medicaid #: 
- Multi Birth Indicator: N
- Birth Order: 
- Age: 312 weeks, 71 months, 5 yrs
- Military: 
- Reminders/Recall Publicity Code: 
- Sex: MALE
- Mother Maiden Name: 
- VFC Status: (Unknown)
- Vaccine Supply: PRIVATE

**Primary Address**

- Address 1: 
- Address 2: 
- City: 
- State: 
- Zip Code: 
- Email: 
- County: United States
- Country: United States
- County/Parish: 

**+ Family & Contact**
**+ Alias**
**+ Secondary Patient Demographics**
**+ School**
**+ Primary Insurance**
**+ Medical Home**
**+ Birth & Death**
**+ Patient Specific Reports**

[Image of a computer interface with patient information]
**Vaccination Summary Page**

Logged in: AREL VANZANDT

Organization (IRMS): VERY HEALTHY SCHOOL DISTRICT (0111116)

**Patient**
- Name: RAJ (K) COMP CAT
- SIIS Patient ID: 6332849
- Date of Birth: 10/01/2012
- Age: 312 weeks, 71 months, 5 yrs
- Status: Inactive
- Guardian:

**Vaccination Summary**

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Date 1</th>
<th>Date 2</th>
<th>Date 3</th>
<th>Date 4</th>
<th>Date 5</th>
<th>Date 6</th>
<th>Date 7</th>
<th>Date 8</th>
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</thead>
<tbody>
<tr>
<td>DTP/DTaP</td>
<td>12/01/2012</td>
<td>02/01/2013</td>
<td>04/01/2013</td>
<td>02/01/2014</td>
<td>02/01/2014</td>
<td>12/01/2014</td>
<td>12/01/2014</td>
<td>12/01/2014</td>
</tr>
<tr>
<td>OPV/IPV</td>
<td>12/01/2012</td>
<td>02/01/2013</td>
<td>04/01/2013</td>
<td>02/01/2014</td>
<td>02/01/2014</td>
<td>12/01/2014</td>
<td>12/01/2014</td>
<td>12/01/2014</td>
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<tr>
<td>MMR</td>
<td>02/01/2014</td>
<td>12/01/2014</td>
<td>12/01/2014</td>
<td>12/01/2014</td>
<td>12/01/2014</td>
<td>12/01/2014</td>
<td>12/01/2014</td>
<td>12/01/2014</td>
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<tr>
<td>Hep B - 3 Dose</td>
<td>12/01/2014</td>
<td>02/01/2014</td>
<td>04/01/2013</td>
<td>02/01/2014</td>
<td>02/01/2014</td>
<td>12/01/2014</td>
<td>12/01/2014</td>
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<tr>
<td>Varicella</td>
<td>02/01/2014</td>
<td>12/01/2014</td>
<td>12/01/2014</td>
<td>12/01/2014</td>
<td>12/01/2014</td>
<td>12/01/2014</td>
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</tbody>
</table>

**Invalid Vaccinations**

<table>
<thead>
<tr>
<th>Invalid Vaccinations</th>
<th>Date</th>
<th>Reason</th>
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</table>

**Vaccine Deferrals**

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Dose</th>
<th>Date</th>
</tr>
</thead>
</table>

**Vaccine Contraindications / Exemptions / Precautions**

- Contraindications
- Exemptions
- Precautions

**Vaccination Forecast**

<table>
<thead>
<tr>
<th>Vaccine Family</th>
<th>Forecasted Dose</th>
<th>Recommended Date</th>
<th>Minimum Valid Date</th>
<th>Overdue Date</th>
<th>Status</th>
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<tbody>
<tr>
<td>FLU</td>
<td>1</td>
<td>04/01/2013</td>
<td>04/01/2013</td>
<td>05/01/2013</td>
<td>Past Due</td>
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<td>HEP-A</td>
<td>1</td>
<td>10/01/2013</td>
<td>10/01/2013</td>
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<td>Past Due</td>
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<tr>
<td>HPV</td>
<td>1</td>
<td>10/01/2022</td>
<td>10/01/2021</td>
<td>10/01/2021</td>
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</tr>
<tr>
<td>Meningococcal</td>
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<td>10/01/2022</td>
<td>10/01/2025</td>
<td>Not Yet Due</td>
</tr>
<tr>
<td>Meningococcal</td>
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<td>10/01/2023</td>
<td>10/01/2023</td>
<td>10/01/2025</td>
<td>Not Yet Due</td>
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<tr>
<td>Tdap</td>
<td>0</td>
<td>10/01/2023</td>
<td>10/01/2023</td>
<td>10/01/2025</td>
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</tr>
</tbody>
</table>
### View/Add Immunizations

**Logged In:** ARIEL VANZANDT

**Organization (IRMS):** VERY HEALTHY SCHOOL DISTRICT (9111116)

**Date:** September 20, 2016

<table>
<thead>
<tr>
<th>Patient</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Name: RAJ (K) COMP CAT</td>
<td>SIIS Patient ID: 0332349</td>
<td></td>
<td></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>Date of Birth: 10/01/2012</td>
<td>Age: 312 weeks, 71 months, 5 yrs</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Guardian:</td>
<td>Status: Inactive</td>
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<td></td>
<td></td>
<td></td>
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<td></td>
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</tbody>
</table>

**Patient Specific Reports**

**Vaccination View/Add**

(• - Histrorical, # - Adverse Reaction, ! - Warning, 12 - Warning, 13 - Warning, S - Unverified Historicals, * - Compromised Vaccination, C - Confidential Services)

**Documented By: **

Double-click in any date field below to enter the default data: **09/28/2013**

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
</tr>
</thead>
<tbody>
<tr>
<td>DTaP</td>
<td>02/01/2014 S</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>DTaP-Hep B-IPV (Pediarix)</td>
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<td>02/01/2013 S</td>
<td>04/01/2013 S</td>
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<td>DTaP-IPV (K Ellis)</td>
<td>12/01/2017 S</td>
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<td>MMR</td>
<td>02/01/2014 S</td>
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<tr>
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<td>vacsela (Varivax)</td>
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<tr>
<td>DTaP-Hib-IPV (Pentacel)</td>
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<tr>
<td>HPV, bivalent (Cervarix)</td>
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<tr>
<td>HPV, quadrivalent (Gardasil)</td>
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<td>HPV9 (Gardasil 9)</td>
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<tr>
<td>Hep A, pediatric 2 dose (Havrix, Vacta)</td>
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<tr>
<td>Hep B Ped/Adol - Preserv Free (Engerix B, Recombivax HB)</td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>Hib (PRP-T) (ActHib, Hiberix, Omnimub)</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
Adding Immunizations

Historical dates entered MUST be from a medically validated source

Examples of medically verified records include:

- Official lifetime immunization record from another country with a unique healthcare provider or clinic stamp/signature; official immigration immunization records
- Immunization record printed from a healthcare provider, clinic, or hospital’s electronic health record
- Written immunization record from a healthcare provider/clinic
- Immunization record printed from a healthcare provider, clinic, or hospital’s electronic health record with a written note/addition
- Immunization record printed from WA’s or another state’s IIS
### School Nurse Action Report

**School:**

<table>
<thead>
<tr>
<th>Grade Level</th>
<th>3rd Grade</th>
</tr>
</thead>
</table>

**Series Name:** SY2014-15 GRADE K-3

**Legend:**


<table>
<thead>
<tr>
<th>Vaccine Family</th>
<th>Dose</th>
<th>Recommended Date</th>
<th>Minimum Valid Date</th>
<th>Status</th>
<th>Temp Exemption Exp Date</th>
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<tbody>
<tr>
<td>VARICELLA</td>
<td>2nd</td>
<td>11/02/2010</td>
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<td></td>
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<td>03/15/2012</td>
<td>03/15/2012</td>
<td>Y</td>
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<tr>
<td></td>
<td>2nd</td>
<td>05/19/2009</td>
<td>05/19/2009</td>
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<tr>
<td>DTaP/Td</td>
<td>1st</td>
<td>09/15/2008</td>
<td>09/15/2008</td>
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<tr>
<td>POLIO</td>
<td>1st</td>
<td>09/15/2008</td>
<td>09/15/2008</td>
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<tr>
<td>HEP-B 0 Dose</td>
<td>1st</td>
<td>09/15/2008</td>
<td>09/15/2008</td>
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<tr>
<td>MMR</td>
<td>1st</td>
<td>09/15/2009</td>
<td>09/15/2009</td>
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</tr>
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<td>VARICELLA</td>
<td>1st</td>
<td>09/15/2009</td>
<td>09/15/2009</td>
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<td></td>
</tr>
</tbody>
</table>

**Report Date:** March 4, 2015

---

### Parent Letter

**To:** The Parent/Guardian of

**Dear Parent or Guardian:**

Washington State law requires all children to be properly immunized to attend or continue attending school. According to our records, your child did not get the required vaccinations to attend school.

Please ask your child’s healthcare provider to give the required vaccination(s) and enter the information into the state immunization registry. If you have an immunization record from your healthcare provider, we can enter the immunizations into the state immunization registry with your consent.

Skipping vaccinations or missing vaccine doses makes it more likely that your child can get sick or give an illness to someone else.

In Washington, all children 18 years old or younger may get vaccines at low or no cost from their health care provider or county health department. Providers may charge an office visit fee and a fee to give the vaccine, called an administration fee. If you cannot pay the administration fee, ask your provider to waive the cost.

Please provide the date(s) of the missing immunizations to the school by . If we don’t get the information by this date, your child will not be allowed to attend school.

More information about Washington State vaccine requirements can be found at the Washington State Department of Health website: [www.doh.wa.gov/CommunityandEnvironment/Schools/Immunization/VaccineRequirements.aspx](http://www.doh.wa.gov/CommunityandEnvironment/Schools/Immunization/VaccineRequirements.aspx)

Please call us right away for help or more information. Thank you for your prompt response!
SCHOOL MODULE ONBOARDING PROCESS
## School Module Onboarding Process

<table>
<thead>
<tr>
<th>Step</th>
<th>Task</th>
</tr>
</thead>
</table>
| 1. Get Access to the School Module | Talk to administrators and IT staff about the School Module  
Email us to let us know when you are ready to onboard  
Complete & mail the Information Sharing Agreement and Cover Sheet  
Directory Upload (Optional) |
| 2. Implement the School Module | Review the School Module Guidance and Expectations document  
Create a plan for implementing the School Module  
Inform parents and staff about changes in recordkeeping |
| 3. Use the School Module | Each staff that needs access will...  
Review the School Module Training Guide & watch the School Module Training Video  
Complete and pass the School Module Post test  
Set up their user account with our system vendor |
The School Module website acts as a toolkit to the onboarding process.

Tools and resources are frequently reviewed and updated to meet the needs of schools.

Resources include a list of schools using the school module, an onboarding checklist, an implementation plan template, sample letters, training materials, and more!
Contact us!

We are here to help!

To access all our School Module tools and resources visit: www.doh.wa.gov/schoolmodule

If you have a question, email us at schoolmodule@doh.wa.gov
RESOURCES
SCHOOL/CHILD CARE IMMUNIZATION
IMMUNIZATION INFORMATION

Website:
www.doh.wa.gov/CommunityandEnvironment/Schools/Immunization

For more information about the School Module:
www.doh.wa.gov/schoolmodule
Email US!

- Questions?
- Feedback!

We are here to help!

OICPSchools@doh.wa.gov
Flyer for Parents

- [www.doh.wa.gov/Portals/1/Documents/Pubs/348-519-WA-MyIR-card.pdf](http://www.doh.wa.gov/Portals/1/Documents/Pubs/348-519-WA-MyIR-card.pdf)
- Order by sending an email to [immunematerials@doh.wa.gov](mailto:immunematerials@doh.wa.gov)

Options to Sign Up

- Consumers can self register: [https://wa.myir.net/register/](https://wa.myir.net/register/)
- Contact our office for help with registration; release form is required (can be emailed): [WAeISRecords@doh.wa.gov](mailto:WAeISRecords@doh.wa.gov)
School and Child Care Listserve


1. Sign in with email and name
2. Click Add Subscriptions button
3. Click the + to open Immunization
4. Check School Nurses and/or Childcare and Preschool
5. Click Submit
QUESTIONS?
IIS Training and Support

IIS Questions & Assistance
Contact the Help Desk
  o 1-800-325-5599
  o WAlISHelpDesk@doh.wa.gov

Request IIS Training
Email the IIS Outreach & Training Team
IIS.Training@doh.wa.gov

IIS Training Resources
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