

POLICY SERVICES ADVISORY

Volume 34, Number 3

September 2022

Policy Advisory No. 737.....JLCB — Immunizations of Students
Regulation JLCB-R — Immunizations of Students

Summary

Policy Advisory No. 737 overhauls the JLCB policy and regulation to conform to Arizona Department of Health regulations and Arizona statute. Policy Advisory No. 738 is the result of law passed by the 55th Legislature, Second Regular Session which convened in January 2022 and adjourned sine die on June 25, 2022. The General Effective Date of this bill is September 24, 2022.

Governing Boards may review and adopt policy advisory No. 737 consistent with the Policy Adoption process in Policy BGB—First Meeting – the proposal shall be presented for review; Second Meeting – the proposal shall be presented for discussion and action. No. 738 is amending a regulation; thus, the Governing Board should be aware of this change, but board action is not necessary to amend.

Policy Advisory Discussion

Policy Advisory No. 737

Policy JLCB — Immunizations of Students Regulation JLCB-R — Immunizations of Students

Policy JLCB was updated in August 2022 to include the Arizona law that precluded COVID-19 from the list of required immunizations. In September 2022, a school district notified ASBA of inconsistencies between Policy JLCB and Regulation JLCB-R. This prompted ASBA staff to conduct a full overhaul of JLCB and JLCB-R. Policy now refers readers directly to Regulation where the previous policy listed out each required immunization. The Regulation now reflects directly what is required by the Department of Health Services. JLCB-E was updated correctly in August 2022.

Note: This material is written for informational purposes only, and not as legal advice. You may wish to consult an attorney for further explanation.

JLCB ©

IMMUNIZATIONS OF STUDENTS

The Board follows Arizona law as it applies to immunizations of students.

For a list of immunizations required for attendance and immunizations specifically not required for attendance see Regulation JLCB-R.

Immunizations Required for Attendance

~~Subject to the exemptions as provided by law, immunization against diphtheria, tetanus, pertussis, poliomyelitis, rubeola (measles), mumps, rubella (German measles), hepatitis B, haemophilus influenzae b (Hib) only required for children 2-59 months—so under 5 yrs. old, quadrivalent meningococcal, and varicella is required for attendance of a student in a District school.~~

Immunizations Not Required for School Attendance

The following immunizations are not required for school attendance:

A. Human papillomavirus.

B. COVID-19 or any variant of COVID-19.

A School District or Charter School, as a governmental entity, that requires a person under eighteen (18) years of age to receive a vaccination for COVID-19 or any variant of COVID-19 must obtain the consent of that person's parent or guardian.

Immunization Procedures

The Board authorizes the Superintendent to create procedures for verifying immunization records of students. The procedures shall be administered in Regulation JLCB-R and Exhibit JLCB-E.

Notice to Parents and Students

A student's immunization record must be submitted prior to attendance, although a student may be conditionally enrolled provided that necessary immunizations have been initiated and a schedule has been established for completion of the required immunizations.

The school administrator shall review the school immunization record at least twice each school year until the pupil receives all of the required immunizations.

A student shall not be allowed to attend school without submitting documentary proof of compliance to the school administrator unless the student is exempted from immunization.

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On enrollment, the school administrator shall suspend that student if the administrator does not have documentary proof of compliance and the student is not exempted from immunization.

A student who fails to comply with the immunization schedule shall be suspended from school attendance until documentary proof of compliance is provided to the school administrator, except that a homeless student shall not be suspended from attendance until the fifth (5th) calendar day after enrollment.

Any student with serologic confirmation of the presence of specific antibodies against a vaccine-preventable disease shall not be subject to immunization against that disease as a condition for attending school.

The District will cooperate with county and state health departments in programs of immunization. Parents' permission must be secured before a student may participate in such immunization projects.

Adopted: _____

LEGAL REF.:

A.R.S.

15-871

15-872

15-873

15-874

36-681

A.A.C.

R9-6-203

R9-6-313

R9-6-350

R9-6-353

R9-6-356

R9-6-365

R9-6-368

R9-6-372

R9-6-388

R9-6-701 through 707

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JLCB-R ©

REGULATION

IMMUNIZATIONS OF STUDENTS

**Immunizations Required for
School Attendance**

Subject to the exemptions in A.R.S. 15-873, immunization against each of the following diseases is required for attendance of a child in any school:

- A. Diphtheria;
- B. Tetanus;
- C. Hepatitis B;
- D. Pertussis;
- E. Poliomyelitis;
- F. Measles (rubeola);
- G. Mumps;
- H. Rubella (German measles);
- I. *Haemophilus influenzae* type b (Hib), for a child two months through 59 months of age; and
- J. Varicella; ~~and~~
- K. Meningococcal;
- L. Hepatitis A, for a child one (1) through five (5) years of age in a day care program in Maricopa County.

To be required for in-person school attendance the immunization must be prescribed by rule adopted pursuant to subsection A of A.R.S. §36-672.

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Immunizations Not Required for School Attendance

- A. Human papillomavirus.
- B. COVID-19 or any variant of COVID-19.

Parental Consent for COVID-19 or COVID-19 Variant:

A School District or Charter School, as a governmental entity, that requires a person under eighteen (18) years of age to receive a vaccination for COVID-19 or any variant of COVID-19, must obtain the consent of that person’s parent or guardian. However, schools may not require immunization for COVID-19 or any variant of COVID-19 unless the immunization is first prescribed by rule adopted pursuant to A.R.S. §36-672 (A). Finally, schools may not require any resident of this state to receive the COVID-19 immunization or any variant of the COVID-19 immunization. See A.R.S. §36-685.

~~Unless exempt in accord with R9-6-706, the schedule for compliance with the requirement for immunization against varicella is:~~

- ~~_____ Grade student entering _____ as of September 1,~~
- ~~Kindergarten (K) through grade four (4) _____ 2008~~
- ~~and grades seven (7) through ten (10)~~
- ~~_____ Kindergarten (K) through grade five (5) _____ 2009~~
- ~~and grades seven (7) through eleven (11)~~
- ~~_____ Kindergarten (K) through grade twelve (12) _____ 2010~~

~~Unless exempt in accord with R9-6-706, the schedule for compliance for a student eleven (11) years or older who has not previously received the meningococcal vaccine is:~~

- ~~_____ Grade student entering _____ as of September 1,~~
- ~~_____ Grade six (6) _____ 2008~~
- ~~_____ Grades six (6) and seven (7) _____ 2009~~
- ~~_____ Grades six (6) through eight (8) _____ 2010~~
- ~~_____ Grades six (6) through nine (9) _____ 2011~~

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~~Grades six (6) through ten (10) 2012~~

~~Grades six (6) through eleven (11) 2013~~

~~Grades six (6) through twelve (12) 2014~~

~~The preceding schedules will remain in effect unless the school is notified by the Arizona Department of Health Services of a modification to one (1) or both of the schedules.~~

Compliance and School Attendance

A child is in compliance with the requirements if the child has met the criteria of the appropriate immunization schedule as recommended by the Department of Health Services or is actively in the process of meeting such criteria as evidenced by having received one (1) dose of each of the required immunizations and has established a schedule for completion of the required immunizations.

A child shall not be allowed to attend school without submitting documentary proof to the school administrator unless the child is exempted from immunization pursuant to section 15-873. Upon enrollment, schools shall forbid attendance or (suspend) a student not meeting the requirements for immunization or exemption from immunization. Homeless students shall be referred to the liaison for homeless students and shall not be required to comply with the immunization requirements until the fifth (5th) calendar day after enrollment.

Guidance for Administrators: In Compliance

The admitting official shall deem the student to be in compliance with the requirements of this regulation if:

- A. The student's immunization record complies with the documentary proof required pursuant to A.A.C. R9-6-704, and the student has received or is in the process of receiving all required age-specific vaccine doses according to Exhibit JLCB-E; or
- B. An exemption from immunization is submitted in accordance with the procedures set forth in R9-6-706.

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**Guidance to Administrators: Records
Unavailable or Insufficient**

When the student's immunization record is not available at the time of enrollment or the documentation requirements are not met pursuant to A.A.C. R9-6-705(A)(1), the school shall provide the ~~responsible person~~ parent or guardian with the following:

- A. A written notification of the lack of compliance with the immunization requirements;
- B. An Immunization Screening and Referral Form for School K-12th Grade or other written notice that specifies when the required doses shall be completed, notes the availability of exemptions to immunization, and refers the student to a physician or local health department for review of the student's immunization history and provision of immunizations as needed; and
- C. A written notification that the student is suspended in accordance with 15-872 until an acceptable immunization record that meets the standards of documentary proof is presented to the school.

When immunization records are presented that do not comply with the standards for documentary proof, the school shall:

- A. Notify the ~~responsible person~~ parent or guardian of the lack of compliance with the immunization requirements; and
- B. ~~Obtain a review and verification of the student's immunization record by or in consultation with a certificated school nurse, a public health nurse, a licensed physician, or an authorized representative of a local health department. Refer parent or guardian to their healthcare provider or local/county health department.~~

If the admitting official is unable to verify the accuracy of the student's immunization record ~~pursuant to the preceding paragraph~~, the school shall provide to the ~~responsible person~~ parent or guardian:

- A. A written notification that the school could not verify compliance with Arizona immunization requirements on the basis of the documents provided and a written referral to a physician or local health department for further review of the student's immunization history and provision of immunizations as needed; and

B. Notification that the student is suspended until an immunization record that meets the standards of documentary proof is presented to the school.

Each school shall maintain a current list of students without evidence of immunization or immunity to the diseases listed in R9-6-702, which shall include the names of all students with incomplete immunization histories or exemptions for personal or medical reasons where evidence of immunity has not been provided.

~~Schools shall forbid attendance by a student lacking proof of immunization or immunity against any of the immunization preventable diseases as determined by the State Department of Health Services or local health department during periods of outbreaks of the diseases for which immunity is lacking. The announcement of an outbreak of disease and the length of the period of communicability shall be as declared by the state or local health department.~~

Outbreaks and School Attendance

Students who lack documentary proof of the required immunizations, regardless of exemption status, may not attend school during outbreak periods of communicable immunization-preventable diseases as determined by the Department of Health Services or local health department.

Standards for Documentary Proof of Immunity

Proof of immunity to the diseases listed in R9-6-702 shall be documented in accordance with R9-6-704.

Immunization records or statements of immunity shall be signed by a physician or authorized representative of a health agency.

Exemptions to Immunizations

~~Students who have reached their fifth (5th) birthday shall be exempt from the Hib immunization requirement.~~

~~Students who have reached their seventh (7th) birthday shall be exempt from the pertussis immunization requirement.~~

Any student with laboratory evidence of immunity shall not be subject to immunization against that disease as a condition for attending school, provided that such evidence is submitted to the school.

In accordance with A.R.S. 15-873, documentary proof is not required for a student to be admitted to school if one (1) of the following occurs:

A. The parent or guardian of the student submits a signed statement to the school administrator stating that the parent or guardian has received information about immunizations provided by the Department of Health Services, understands the risks and benefits of immunizations and the potential risks of nonimmunization, and that, due to personal beliefs, the parent or guardian does not consent to the immunization of the student.

B. The school administrator receives written certification, signed by the parent or guardian and by a physician, that states that one (1) or more of the required immunizations may be detrimental to the student's health and indicates the specific nature and probable duration of the medical condition or circumstance that precludes immunization.

An exemption pursuant to the preceding subparagraph is valid only during the duration of the circumstance or condition that precludes immunization.

If a medical exemption is granted in accordance with A.R.S. 15-873, it shall be defined by the grantor as either permanent or temporary.

A. A permanent medical exemption may be provided for one (1) or more vaccines.

B. A temporary medical exemption shall specify the date of its termination. A student with a temporary medical exemption shall be allowed to attend school on the condition that the required immunizations are obtained at the termination of the exemption. The responsible person shall be notified of the date by which the student shall complete all required immunizations.

Any exemption granted in accordance with A.R.S. 15-873 shall be recorded on the school immunization record in the student's permanent file.

~~Students who lack documentary proof of immunization shall not attend school during outbreak periods of communicable immunization-preventable diseases as determined by the Department of Health Services or local health department. The Department of Health Services or local health department shall transmit notice of this determination to the school administrator responsible for the exclusion of the students.~~

Reporting Communicable Diseases

The administrator of a school shall submit by telephone a report to the local health department any case, suspected case, or outbreak of a communicable disease as follows:

A. Within twenty-four (24) hours after detecting a case or suspected case of:

1. Cryptosporidiosis
2. Enterohemorrhagic Escherichia coli
3. Haemophilus influenzae: invasive disease
4. Hepatitis A
5. Measles
6. Meningococcal invasive disease
7. Mumps
8. Pertussis (whooping cough)
9. Rubella (German measles)
10. Salmonellosis
11. Shigellosis

B. Within twenty-four (24) hours after detecting an outbreak of:

1. Conjunctivitis: acute
2. Diarrhea, nausea, or vomiting
3. Scabies
4. Streptococcal Group A infection

C. Within five (5) working days after detecting a case or a suspected case of:

1. Campylobacteriosis
2. Varicella (chicken pox)

The report shall include:

- A. The name and address of the school
- B. The number of individuals having the disease, infestation, or symptoms
- C. The date and time the disease or infestation was detected or the symptoms began
- D. The number of rooms, grades, or classes affected and the name of each
- E. Information about each affected individual to include:
 - 1. Name,
 - 2. Date of birth or age,
 - 3. Residential address and telephone number,
 - 4. Whether the individual is a staff member, student, child in care, or a resident,
- F. The number of individuals attending or residing in the school, and
- G. The name, address, and telephone number of the person making the report.

Superintendent's Annual Report Other Required Reports

By November 15 of each year, the Superintendent shall submit a report on the immunization status of students (childcare and K-12) to the state or local health department on a form provided by the Department.

~~Each Superintendent of a school whose nurses are authorized to administer vaccines or immunizing agents shall submit monthly reports to the county health department in accordance with the procedures set forth in R9-6-707. Reports are due by the fifth (5th) day of the following month.~~

An immunization record shall be maintained for each student in the school. Pursuant to 15-874, each immunization record shall include the following information:

- A. Name of the student;
- B. Date of birth;

C. The date of the student's admission to the school;

~~D. The month and year in which each vaccine was received, except for measles, mumps, and rubella, for which the day, month, and year are required;~~ The date (day, month, and year) each required vaccine dose was received;

E. The type of immunizing agents administered to the student;

~~F. The date each dose of immunizing agent is administered to the student;~~
and

~~F.~~ The established schedule for completion of immunizations if the student is admitted to or allowed to continue to attend a school pursuant to section 15-872, subsection E;

~~G.~~ Laboratory evidence of immunity if this evidence is presented as part of a pupil's documentary proof;

~~H.~~ If an exemption from immunization as provided in section 15-873 is submitted to the school administrator, the date the exemption is submitted and the reason for the exemption;

~~By November 15 of each year, each administrator of a public school-based day care program or preschool shall submit a report to the state or local health department on a form provided by the Department.~~

~~A school shall transfer an immunization record and signed requests for provision of immunizations, including any revocations thereof, with the mandatory permanent student record and provide at no charge, on request, a copy of the immunization record to the parent or guardian of the pupil.~~

Records on Request

A school shall transfer an immunization record with the mandatory permanent student record and provide at no charge, on request, a copy of the immunization record to the parent or guardian of the pupil.

JLDAB-E ©

EXHIBIT

**REFERRALS TO OTHER AGENCIES
SURVEY**

Surveys

The following survey was created by the Arizona health care cost containment system. It can be found at: <https://forms.gle/siXH3bgmn3xfw9qk9>. The results will be recorded by AHCCCS and sent to the Governor annually. This survey meets the requirement of statute.

**Behavioral Health
Services Survey**

You are being invited to complete this survey as a parent/guardian whose child/children were referred for behavioral health services through their school. This information will be used to improve the process for referrals and use of behavioral health services through schools. Unless you choose to include your personal information, your responses are anonymous.

Some definitions to consider: behavioral health services means treatment for the connection between the health and well-being of the body and the mind including mental and substance use issues; referral means direction for services from the school to a provider.

Interpretation services can be provided at no cost, if needed. For interpretation services, or any other questions, please ask your provider for assistance in completing the survey.

*** *Required***

What is your child's age? * _____

What school does your child attend? * _____

What grade is your child in? * _____

What is your child's gender? * _____

What is your child's race? * _____

Note: This material is written for informational purposes only, and not as legal advice. You may wish to consult an attorney for further explanation.

How happy were you with the way in which you were asked about consenting to, or opting-in, for your child to be referred for behavioral health services? *

Very Unhappy 😞

- 1
- 2
- 3
- 4
- 5

Very Happy 😊

How happy were you with the way you were notified of your child being referred for behavioral health services? *

Very Unhappy 😞

- 1
- 2
- 3
- 4
- 5

Very Happy 😊

How happy were you with the behavioral health services that your student received? *

Very Unhappy 😞

- 1
- 2
- 3
- 4
- 5

Very Happy 😊

How happy were you with the choice of behavioral health service providers? *

Very Unhappy 😞

1

2

3

4

5

Very Happy 😊

If needed again in the future, would you consent to, or opt-in to, a referral for behavioral health services through your student's school? *

___ Yes

___ No

If you would like to give any additional comments, please add here.

Good Morning,

Please accept this letter as a formal notice of my intention to resign from my position as a teacher at Hope Academy, my final day will be November 21, 2022. I have enjoyed my time working at Hope and wish the staff and students the best as you continue to pioneer new ideas in the education world.

I will continue to manage the Special Education data for the next two weeks and am happy to train someone else to take over my current task load and/or leave detailed notes and step by step directions for someone else to pick up where I've left off. I will leave lesson plans for FLEx through the month of November for SEL and English support, as time permits I am also willing to write lessons for those classes into the December weeks as well. I will be transferring all of my planning files into the shared drive this week so you have easy access to my work.

If you need anything else from me in the meantime, please let me know.

Sincerely,

Rachel Helgager

Kevin Malakowsky
4249 W. Cavalier Dr.
Phoenix, AZ 85019
10/31/2022

Bonnie Romo
Finance Coordinator
Maricopa County Regional School District
4041 N. Central Ave. Suite 1200
Phoenix, AZ 85012

Dear Bonnie Romo:

It has been great to work with the school district, but I am moving on to my new position with the county. I am grateful for the last 10 years and all I have learned and been able to accomplish.

Sincerely,

Kevin Malakowsky
Mutli-Classroom Leader