

Mew Tersey mmuhization Campaigh









Focus on child care

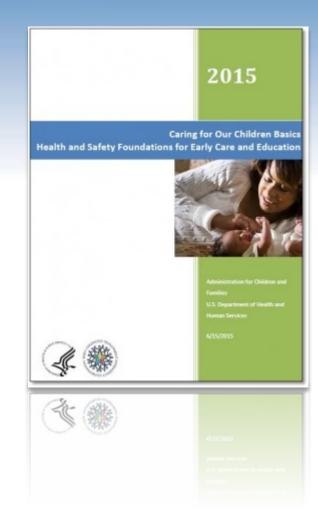
Immunization and Early Childhood Development

- Early years important to childhood growth and development
- Multiple milestones in 1st year of life
 - Social and Emotional
 - Language/Communication
 - Cognitive (learning, thinking, problem solving)
 - · Movement/Physical Development



SOURCE: Centers for Disease Control and Prevention, Child Development, https://www.cdc.gov/ncbddd/actearly/pdf/checklists/all_checklists.pd

SOURCE: Centers for Disease Control and Prevention. Child Development, https://www.cdc.gov/ncbddd/actoarh/fodf/checkiists/all_checkiists.pd





How Child Care Providers Play a Role in Childhood Immunizations

April 21, 2017 | by Andrew Roszak | Child Care, Early Childhood Education, Safety, Training

April 21, 2017 | by Andrew Roszak | Child Care, Early Childhood Education, Safety, Training

Immunizations





Common feedback from child care facilities

"Keeping track of who's got what vaccines is really burdensome and I just don't have the time"

"I don't have the clinical background"

"I'm unsure of what I'm looking at and what is required"

"This is outside of my scope of responsibilities"





Immunizations in the child care setting



Staff may have limited background in immunizations

Can make it difficult to understand the rules, regulations, and complex immunization schedule



Burden of tasks

May feel it is too time consuming and question if it is their responsibility to:

- Review and update an immunization record
- Check for immunization compliance
- Educate parents
- Complete and submit annual immunization reports

These factors can lead to unintentionally undermining the importance of immunizations





Child care facilities as key partners

Most children <5
years spend part
or most of their
day in some type
of child care

Frequent contact with parents/caregivers



Provide care in a consistently safe and supportive environment







New Jersey Hot Shots for Tots



Objective

Empower child care providers to implement immunization best practices to maintain/and or improve immunization coverage levels



Method

Motivate through recognition and incentives via a child care-based immunization campaign





What is *Hot Shots for Tots*?

A voluntary point-based incentive program designed to help increase immunization rates and preventive services for children in child care settings

Participants complete immunization-related activities to earn points

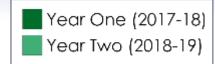
Through participation, child care staff are taking steps to:

- increase vaccination knowledge
- raise immunization awareness
- improve immunization coverage rates





Campaign expansion





1 Essex

2 Hudson

3 Union

4 Passaic

Year Three...Statewide!





Campaign timeline

Campaign Launch *November* Open Enrollment Ongoing

Submission Deadline June Review of Submissions/ Validation

June/July

Awards August





Campaign documents

- ☐ Welcome Packet ☐ Activity Log
- ☐ Event/Activity Form
- ☐ Submission Form

New Jersey Hot Shots for Tots Immunization Campaign





Event Activity Form

is this teading, that to do counted which exists a your world his to participate in, and to nearly you about throughout the solution lies affected amount of the data way used tead of complete describes. The to fine destination (4)—6 are meadatory and add to participate in the program. You is ny only complete such activity one time. A simple activity will not receive points for more y For a semple, providing immerationismic information to per entiring more specified in the contraction of the counter of the count

conhunction of activities to reach the does level you want to reach: Gold, Silver, or Branze! Below are a few examples an get your facility to the Bot Shots for Tots Gold Does Level. For example, in Track #1 you must complete both withs, both 50-point activities, and four 15-point artitletes to reach the Gold Does Level.

ALAMA LOS								
Activity Number	Activity Description	Additional Details	Documents Needed	Point Value	Activity Selected (y/n)	Date Activity Completed	Submitted (y/n)	
1	MANDAT ORY - Entere that all children have immunication seconds and/or applicable enemptions on file.	All investriation records and/or energition will be reviewed by local health department during your annual investriation sould.	No additional documentation meded	2.5	V			
2	MANDATORY - Sub roit the Armal Immunization 5 tobs Report (ASR) by instal deadline (February 1, of the respective anadomic war.	To be reviewed by the New Jersey Department of Besids.	Submit ASR electronically	2.5	V			
3	MANDATORY - Submit the pos- program narvey	Link to be circulated to all participating facilities once essolled.	Print a confirmation page	2.5	V			

NJ Health

Instructions: Below is a description of each activity and the documentation required for each. Complete a separate event/activity form for each of the activities selected. Place a check mark in the first column if you have completed the activity.

Activity Selected (check if relected) Activity Number		Activity Description	Additional Documentation				
	9	Participate in national immunization public health observances.		In the description, include the name of the immunization event.			
	11	Incorporate vaccine-preventable disease information into a lesson plan and/or classroom activity.	0	Attach a copy of the lesson plan along with the Event/A			
	12	Recognize and promote positive immunization behaviors.	0 0	List the method of distribution (e.g., email, mail, etc.) You may attach a sample copy of the message.			
	14	Post educational materials on immunization/communicable disease- related topics (e.g. flu vaccine requirement, handwashing) in facility.	0	Include a description of the materials you posted in you You may provide photos of the posted materials.			
	15	Provide information to parents about childhood immunizations.	0	Describe the materials you distributed to parents. List the distribution (e.g., email, mail, etc.).			
	16	Distribute immunization information to parents/guardians and grandparents about adult immunizations.		Include a description of the adult immunization materia- parents and/or grandparents (e.g., NJ Department of He immunization brockner, CDC adult immunization scheck the method of distribution (e.g., email, mail, etc.)			
	17	Confirm facility has a mechanism for tracking required childhood immunizations for provisional students.	0 0	Describe your method used for tracking students who w provisionally admitted. Indicate if you used a form to tr students (e.g. NJ Department of Health's Provisional As Student Tracking Form). If you use your own form, attach a sample (blank) copy			



New Jersey Hot Shots for Tots

Instructions: Please use this form to submit all required documentation to the New Jersey Department of Health, no later than July 10, 2018. You must solomit each of the items listed below to be eligible.

Documentation submitted without this cover sheet will not be accepted. All items should be submitted at the same time, please do not send items individually.

Name of Child Care Facility	
Location (with complete address)	
Contact Name	
Contact Phone	
Contact Email	

- When submitting your documentation, please include the following:

 1. Submission Form

 2. Activity Log

 3. Event Activity Forms

 4. Confirm stone of Fee-Fragram evaluation

 5. Confirm ston of Fee Fragram evaluation

 6. Any other corresponding documentation (e.g. copy of policy, lesson plan)

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This information can be emailed, mailed, or faxed to

New Jersey Department of Health Vaccine Preventable Disease Program PO Box 369 Trenten, NJ B6625-0369 ATTN: NJ Hot Shots for Tots



Welcome packet

Overview of the campaign

Credible resource lists

Materials to help you complete activities

2019-20

New Jersey Hot Shots for Tots Immunization Campaign

Welcome Packet







2019-20

New Jersey Hot Shots for Tots Immunization Campaign Welcome Packet



Welcome packet



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Classroom Activities

- CDC Lesson Plans and Activities for Child Care and Early Childhood Programs www.cdc.gov/flu/pdf/freeresources/updated/teachingchildrenflu.pdf
- CDC Ready Wrigley Prepares for Flu Season (coloring and activity book) www.cdc.gov/phpr/readywrigley/documents/ready_wrigley_flu.pdf
- CDC "I Got My Flu Vaccine" Sticker Template www.cdc.gov/flu/pdf/freeresources/healthcare/fight-flu-stickers-solid.pdf



National Foundation for Infectious Diseases: Are You a Flu Fighter (coloring book)*
www.nfid.org/coloring-book

Appendix B - Activity #9

Activity #9: Facility has a vaccination policy for all child care/preschool staff, with a minimum requirement for influenza (flu) and/or tetanus, diphtheria and acellular pertussis (Idap) vaccines. Facilities should have documented guidance/policy on staff immunization requirements and/or applicable exemptions.

Included below are:

- Sample policy text;
- · Letter to notify staff of the details of the policy requiring immunization documentation; and
- Staff declination forms.

These documents should be reviewed and modified prior to incorporating them into your facility policy.

SAMPLE POLICY

Purpose:

The purpose of this policy is to require all child care/preschool staff members to provide documentation of vaccination against communicable diseases most likely to be transmitted in a child care setting. The National Health and Safety Performance Standard 7.2.0.3, recommends caregivers/teachers should be current with all immunizations routinely recommended for adults by the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC) as shown in the "Recommended Adult Immunization Schedule" at www.cdc.gov/vaccines/schedules/index.html.

This policy is designed to protect the health of our staff and the children we serve, and to prevent the spread of communicable diseases by ensuring compliance with the ACIP recommendations.

Policy:

All staff of the [insert name of facility] shall provide immunization documentation against the following:

- · Tetanus, diphtheria, pertussis (Tdap): 1 dose with additional booster every 10 years
- Hepatitis B (HepB): 3 doses (or an approved 2-dose schedule)
- Measles, mumps, rubella (MMR): 2 doses
- Varicella (Chickenpox): 2 doses or proof of previous exposure
- Influenza (Flu vaccine): 1 dose every year

If a staff member is unable or unwilling to provide appropriate documentation, the child care facility will request the employee to review and sign an educational factsheet on the importance of vaccination.

Rationale:

Routine immunization of adults is the best means of preventing vaccine-preventable diseases. Protection from vaccines received as a child can fade over time, and therefore adults may be at risk for new and different diseases. Adults vaccines, which are safe and effective in preventing these diseases, should be used to minimize disease and to eliminate potential sources of transmission.







Activity log

 List of all available activities and the corresponding point values

 PDF version auto sums the point values of selected activities so participants can easily keep track of points NJ Hot Shots for Tots Program Activity Log, 2019-20





Activity Number	Activity Description	Additional Details	Documents Needed	Point Value	Activity Selected (y/n)	Date Activity Completed	Submitted (y/n)
1	MANDATORY – Ensure that all children have immunization records and/or applicable exemptions on file.	All immunization records and/or exemptions will be reviewed by local health department during your annual immunization audit.	No additional documentation needed	2.5			
2	MANDATORY - Submit the Annual Immunization Status Report (ASR) for the respective academic year.	To be reviewed by the New Jersey Department of Health.	Submit ASR electronically	2.5			
3	MANDATORY – Submit the pre- program survey	Link to be circulated to all participating facilities once enrolled.	No additional documentation needed	2.5			
4	MANDATORY – Submit the post-program survey	Link to be circulated to all participating facilities once enrolled.	No additional documentation needed	2.5			
5	Ensure director or designee attends an annual immunization workshop/conference to identify reporting and documentation requirements.	Facilities must participate in an immunization education training sponsored by the State VPDP and/or local health department during the school year (including the summer preceding) or access the pre-recorded webinar at https://register.gotowebinar.com/register/8866674369879174412	Copy of Certificate of Completion	50			
6	Confirm facility has a 100% compliance rate at the initial audit conducted by their local health department.	Facilities must have no vaccine deficiencies during their initial immunization audit. All students must have received all required immunizations or are in the process of receiving immunizations as rapidly as medically feasible (provisional admission) or have valid medical or religious exemptions on file.	No additional documentation needed	50			
7	Complete the immunization record transcription activity.	The scenario and form to complete this activity are available in Appendix A of the welcome packet. Once completed, email or fax the completed form to Jenish sudhakaran@doh.nj.gov. You will then receive a link to view the pre-recorded webinar to review each step in correctly transcribing. Both components must be completed, no partial credit will be given.	Email/fax completed yellow card View the pre- recorded webinar	50			

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How are points determined?

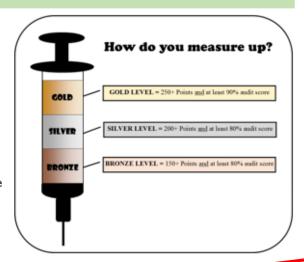
HOW ARE THE AWARD LEVELS DETERMINED?

Award levels are determined based on two factors:

- Your facility's immunization record audit score;
- 2. Total number of points awarded for the selected activities.

Complete any combination of activities to reach the award level you want to achieve: Gold, Silver, or Bronze!

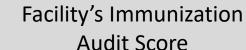
Participants who complete all mandatory activities and submit, but do not reach minimum 150 points or minimum 80% audit score will receive an Honorable Mention award.



Immunization Points from Level Record Audit Completed Description Score Activities Has gone above and beyond in demonstrating commitment toward promoting 250+ points 90% or higher Gold immunization awareness and working towards improving coverage Has demonstrated strong commitment toward promoting immunization awareness 80% or higher 200+ points Silver and working towards improving coverage Has taken initiative toward promoting immunization awareness and working 80% or higher 150+ points Bronze towards improving coverage Must complete Has begun making efforts toward promoting immunization awareness and working Honorable No criteria all mandatory Mention towards improving coverage activities

Total number of points awarded for selected activities







Event/Activity Form

Event Activity Form



Instructions: Below is a description of each activity and the documentation required for each. Complete a separate event/activity form for each of the activities selected. Place a check mark in the first column if you have completed the activity.

Activity Selected (check if selected)	Activity Number	Activity Description		Additional Documentation
	9	Participate in national immunization public health observances.		In the description, include the name of the immunization awareness event.
	11	Incorporate vaccine-preventable disease information into a lesson plan and/or classroom activity.		Attach a copy of the lesson plan along with the Event/Activity form.
	12	Recognize and promote positive immunization behaviors.	0	List the method of distribution (e.g., email, mail, etc.) You may attach a sample copy of the message.
	14	Post educational materials on immunization/communicable disease- related topics (e.g. flu vaccine requirement, handwashing) in facility.		Include a description of the materials you posted in your facility. You may provide photos of the posted materials.
	15	Provide information to parents about childhood immunizations.		Describe the materials you distributed to parents. List the method of distribution (e.g., email, mail, etc.).
	16	Distribute immunization information to parents/guardians and grandparents about adult immunizations.		Include a description of the adult immunization materials you gave to parents and/or grandparents (e.g., NJ Department of Health's adult immunization brochure, CDC adult immunization schedule, etc.) List the method of distribution (e.g., email, mail, etc.)
	17	Confirm facility has a mechanism for tracking required childhood immunizations for provisional students.		Describe your method used for tracking students who were provisionally admitted. Indicate if you used a form to track these students (e.g. NJ Department of Health's Provisional Admission Student Tracking Form).
				If you use your own form, attach a sample (blank) copy.

Hot Shots for Tots Campaign, 2019-20 Event Activity Form



Organization name	ABC Preschool							
Activity number	∡ 10	□13	□14	□15	□17	□18	□19	□20
Description of event/activity	explaining w			Preschool ha				
Date	April 2020							
Time	Every day of	the week						
List of materials distributed (if applicable)		U Immunization nunization colo		nts chart with p	arents			
List of number of materials distributed (if applicable)	50 materials	distributed						
List of method of distribution (if applicable)	Handouts							

Submit additional documentation if necessary.

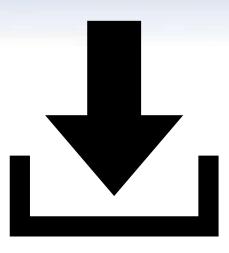
Submit a picture of the bulletin with the winning poster and samples of materials sent home.

New Jersey Hot Shots for Tots Immunization Campaign





Submission Form





New Jersey Hot Shots for Tots Official Submission Form

Instructions: Please use this form to submit all required documentation to the New Jersey Department of Health no later than July 10, 2018. You must submit each of the items listed below to be eligible. Documentation submitted without this cover sheet will not be accepted. All items should be submitted at the same time, please do not send items individually.

Name of Child Care Facility	
Location (with complete address)	
Contact Name	
Contact Phone	
Contact Email	

When submitting your documentation, please include the following:

- 1. Submission Form
- 2. Activity Log
- 3. Event Activity Forms
- 4. Confirmation of Pre-Program evaluation
- 5. Confirmation of Post-Program evaluation
- 6. Any other corresponding docum entation (e.g. copy of policy, lesson plan)

This information can be emailed, mailed, or faxed to:

New Jersey Department of Health Vaccine Preventable Disease Program PO Box 369 Trenton, NJ 08625-0369 ATTN: NJ Hot Shots for Tots

Fax: 609-826-4866 Email: <u>Jenish.Sudhakaran@doh.nj.gov</u>





Incentives for participating

Empowers child care providers

Supports Quality Rating and National Accreditation Standards for preschool and child care facilities

Window sticker, web badge, certificate to highlight achievement to parents

Demonstrates facilities' commitment to keeping kids healthy

Creates competition among child care facilities in the State

Press release and recognition on NJDOH website





Hot Shots for Tots website

Home > Immunization Requirements > New Jersey Hot Shots for Tots Immunization Campaign

Immunization Requirements

Local Health Department and School Audits

NJ Administrative Code

Vaccine Preventable Disease Program

The Hot Shots for Tots Immunization Campaign is an initiative of the Vaccine Preventable Disease Program.

Learn More

New Jersey Hot Shots for Tots Immunization Campaign

Expanding Statewide in 2019-2020!

The Hot Shots for Tots Immunization Campaign is a voluntary, point-based incentive program for child care and preschool facilities. The campaign encourages and facilitates a collaboration with immunization stakeholders to promote best practices and improve immunization coverage.

Participating facilities conduct immunization-related activities to earn points toward reaching one of the three award levels: Gold, Silver, or Bronze. Examples of qualifying activities include: attending an annual immunization workshop, participating in the New Jersey Immunization Information System (NJIIS), and providing information to parents about childhood immunizations.

Hot Shots for Tots was launched exclusively in Monmouth County in 2017-2018 and expanded to include Atlantic and Warren Counties the following year. For 2019-2020, we are inviting all New Jersey child care and preschool facilities to participate. Please see the campaign materials to learn more. If you have any questions, please contact the Vaccine Preventable Disease Program at 609-826-4861.



NJ Hot Shots for Tots Campaign Materials

Welcome Packet

Activity Log

Event/Activity Form

Submission Form





Award ceremony









Evaluation







Hot Shots T/F Survey Responses, Pre-Program (n=30) and Post-Program (n=26)

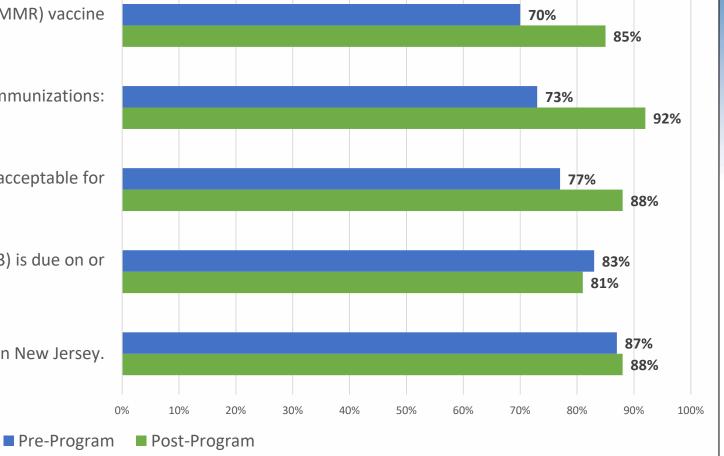
One age-appropriate dose of measles, mumps, and rubella (MMR) vaccine is required for child care/preschool.

New Jersey allows three types of exemptions for immunizations: philosophical, religious, and medical.

A flu vaccine administered in August of the current year is acceptable for attendance in a child care facility.

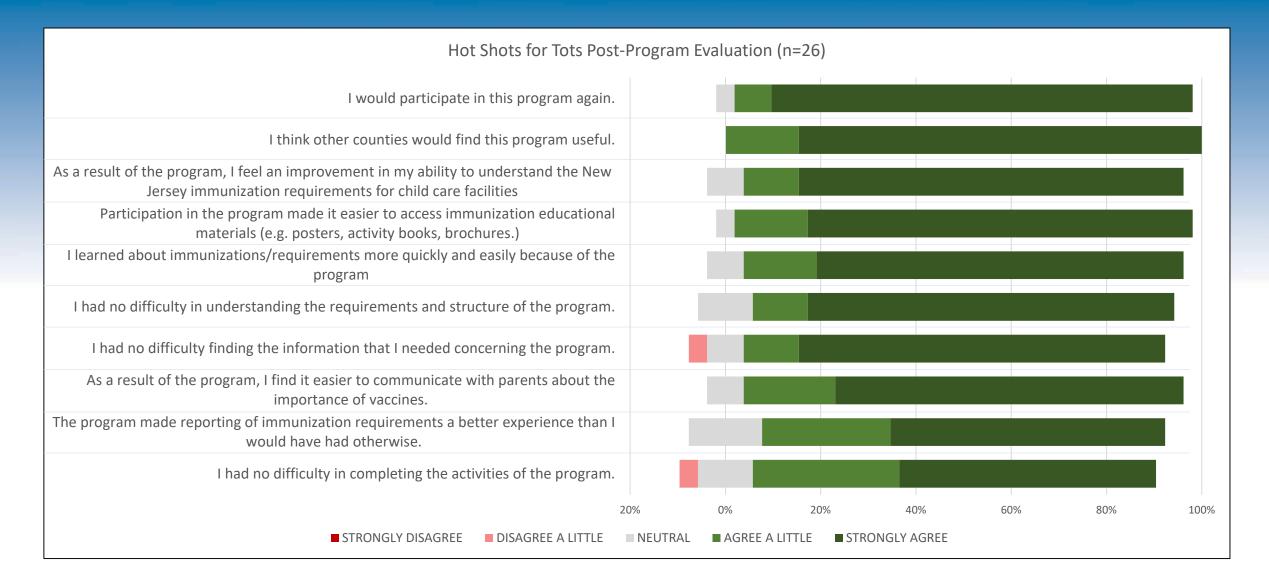
At least one dose of pneumococcal conjugate vaccine (PCV13) is due on or after a child's first birthday.

Rotavirus is required for child care/preschool attendance in New Jersey.













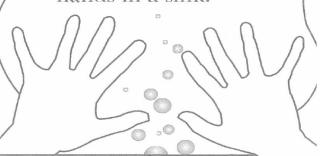
Thank You!

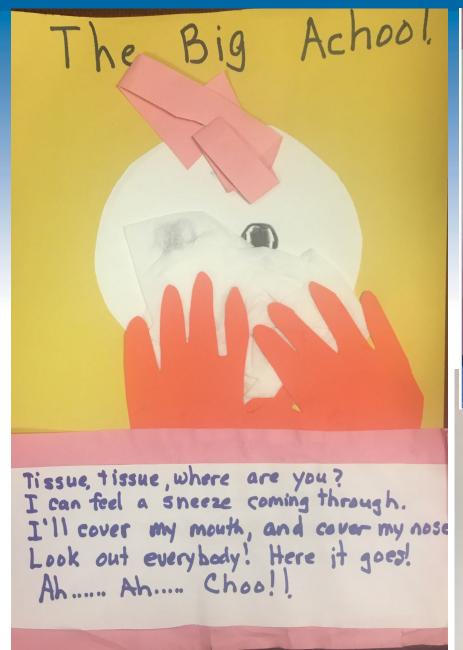
Dear Parent/Guardian,

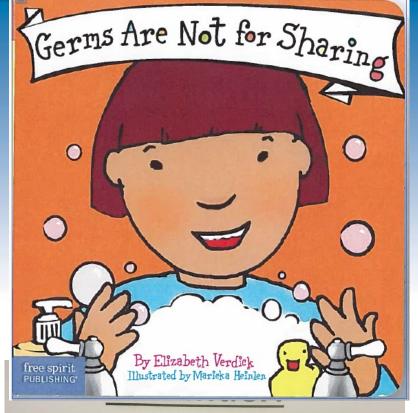
I have received your child's updated vaccination record. You work hard to protect your child every day and vaccines are an important part of that effort. I appreciate your dedication to helping to protect your child against dangerous diseases.

My Pledge

I pledge to cover my mouth and nose when I cough or sneeze.
I pledge to wash my hands in a sink.







Flu vaccines due by

12-31-17





Contact information

Jennifer Smith, MPH CHES
Health Educator
Jennifer.Smith@doh.nj.gov

Jenish Sudhakaran, MPH
Population Assessment Coordinator
Jenish.Sudhakaran@doh.nj.gov



New Jersey Department of Health Vaccine Preventable Disease Program 609-826-4861