



# DISTRICT OF COLUMBIA SCHOOL IMMUNIZATION POLICY

## Frequently Asked Questions for School Leaders about Enforcing Immunization Requirements

### 1. What routine pediatric immunizations are required for students to attend school?

The list of routine pediatric immunization requirements by age can be found on the DC Health Immunization Program [website](#). DC Official Code § 38–503 permits the Mayor to specify, by regulation, the list of required immunizations for District students. DC Health has done this through regulation, DCMR 22-B §§ 130-152.<sup>1</sup> The full list of required immunizations includes the Human Papillomavirus (HPV) vaccination, with an optional parental or adult student [opt-out](#) (DCMR 22-B § 146.4).

### 2. How do schools maintain documentary proof of immunization certification?

Schools shall primarily rely on the Immunization Compliance Portal (Salesforce) as the system of record for accessing immunization certification data. School Health Management and the District of Columbia Immunization Information System (DOCIIS) are the systems of record that school nurses and Immunization Points of Contact (IPOCs) use for entering necessary immunization certification data. School Health Management contains the electronic health record that Children’s School Services nurses maintain for students in schools participating in the DC Health School Health Services Program. Nurses in public charter schools not participating in the DC Health School Health Services Program can opt into using this management system. Access to School Health Management is not yet available to private, parochial, or independent schools. DOCIIS contains a digital record of immunizations for residents of the District of Columbia and non-District residents immunized in DC. DOCIIS updates immediately when an immunization is administered and recorded in the system (i.e., by a certified medical provider, DC Health, or a school

IPOC, such as a school nurse). Immunization data entered in School Health Management are updated in DOCIIS in approximately 24 hours, and immunization data entered in DOCIIS for students enrolled in DC schools are updated in School Health Management in approximately 24 hours. When an immunization record is updated in DOCIIS, it will be reflected in the Immunization Compliance Portal (Salesforce) the next day. Updates to a school’s enrollment roster are sent via the Office of the State Superintendent of Education (OSSE) to DOCIIS and update weekly. Enrollment roster updates must not be made directly in DOCIIS.

Schools shall also accept and maintain written documentary proof of routine pediatric immunization certification if received via (1) certification from a medical provider that the required immunizations have been completed via a [Universal Health Certificate](#) (UHC) or other written immunization record with a provider stamp, seal, or signature; (2) formal exemption from the required immunization (religious or medical exemption, or HPV Opt-Out); (3) written records forwarded from a student’s previous school; (4) proof from a medical provider that the student is in the process of receiving an immunization series in accordance with DC Health immunization requirements; or (5) alternative proof of immunization certification approved by DC Health (e.g., blood antibody tests or official immigration immunization record). As stipulated in Section II of the School Immunization Policy, each school will be responsible for assembling a School Health Team, including IPOCs who will access, collect and maintain immunization certification records at the school and act as a liaison with DC Health.

An appointment card from a medical provider does not meet the requirements of immunization certification.



### **3. What is the difference between immunization certification and the Universal Health Certificate?**

Immunization certification is proof that the student meets the District's pediatric immunization requirements. One type of immunization certification is a completed [UHC](#), but it is not the only type. Other types include (1) a digital record in DOCIIS; (2) formal exemption from the required immunization (religious or medical exemption, or [HPV opt-out](#)); (3) written records forwarded from a student's previous school; (4) proof from a medical provider that the student is in the process of receiving an immunization series in accordance with DC Health immunization requirements; or (5) alternative proof of immunization certification approved by DC Health (e.g., blood antibody tests or official immigration immunization record). Schools cannot require the UHC as the sole source for confirming a student's compliance with pediatric immunization requirements.

The [UHC](#) and [Oral Health Assessment](#) are official health forms that schools are required to distribute and collect each school year (DC Official Code § 38–602(a)); however, schools shall not exclude a student from school if the forms are not returned or completed (DC Official Code § 38–604(a)). Again, a completed UHC is only one type of immunization certification by which a School Health Team may confirm a student's compliance with pediatric immunization requirements. UHCs and Oral Health Assessments must also be documented in the Student Information System (SIS).

### **4. How will a school determine when a student in grade pre-K 3, kindergarten, 7, or 11 does not have proper immunization certification in order to notify them in a timely manner that they have until the exclusion date specified by OSSE to become compliant with immunization rules?**

As stipulated in Section II of the School Immunization Policy, it is strongly recommended that each school assemble a School Health Team that includes a school leader, member of the school registrar's office and the IPOCs. The School Health Team will jointly review school immunization compliance and confirm when an enrolled student is non-compliant. When this is confirmed, the school leader will review and approve written notification to be sent to the parent, guardian, or adult student. This written notification will initiate the timeline specified by OSSE that will allow the student to continue attending school while obtaining immunization certification. The school leader shall review and approve any communication or determination made that will affect an enrolled student's attendance at the school.

### **5. How are parents, guardians and adult students in grades pre-K 3, kindergarten, 7, and 11 notified of immunization non-compliance, and how will schools monitor these notifications?**

As stipulated in Section II of the School Immunization Policy, the School Health Team will coordinate a warning notification of temporary exclusion as well as recommended frequent subsequent communication, with the parent, guardian, or adult student. The warning notification of temporary exclusion must include: (1) a statement that the school has no certification of immunization for the student and a list of the specific missing immunization(s); (2) a statement that the student may not attend school without immunization certification (or exemption) after the exclusion date specified by OSSE; (3) details on where the student may receive the immunization by a private physician or the public health authorities (including opening and closing times and locations); (4) information for how to contact the public health authorities to learn where and when they perform these services; and (5) copies of the appropriate forms (i.e., the Universal Health Certificate and DC Health's immunization requirements). Schools shall make reasonable attempt to ensure the notifications are received and understood. The notifications must be translated into languages other than English and provided in alternate formats to facilitate effective communication for individuals with disabilities as consistent with federal and District law and local education agency (LEA) policy.

### **6. What is the formal process for temporarily excluding a student in grade pre-K 3, kindergarten, 7, or 11 after 20 school days have passed, and how will the student's attendance be coded?**

As stipulated in Section II of the School Immunization Policy, the School Health Team will jointly make a determination when a student remains out of compliance after the exclusion date specified by OSSE has passed. The School Health Team will send final notification of temporary exclusion to the parent, guardian, or adult student stating the student will no longer be able to attend school until immunization certification is obtained. While the student is not attending school, the school shall record the student's attendance using the attendance code: "unexcused absence – immunization" (AFUI). This attendance code will allow the school, LEA and OSSE to track the frequency of students being temporarily excluded based on immunization certification non-compliance. If a student's attendance is coded as "unexcused absence – immunization" (AFUI) for multiple school days, it may trigger educational neglect, truancy and referrals to the Child and Family Services Agency (CFSA), Child Support Services Division (CSSD) and Office of the Attorney General (OAG). LEAs shall follow their established attendance protocols and interventions for prolonged unexcused absences.

**7. What will be the process to allow a student to return after being temporarily excluded, and how will the student’s attendance be coded?**

As stipulated in Section II of the School Immunization Policy, the school shall allow the student to return when the School Health Team and IPOC confirm receipt of proper immunization certification. It is recommended that the school leader, in partnership with the IPOC, confirm receipt of the immunization certification and provide both verbal and written confirmation to the parent, guardian, or adult student that states the student is able to return. Upon the student returning to school, the school shall reclassify the attendance coded as “unexcused absence – immunization” (AFUI) to the attendance code “excused absence – immunization” (AFEI). This conversion from “unexcused absence” to “excused absence” is common for schools when students return from an “unexcused absence” and present formal documentation to excuse the absence, such as presenting a doctor or dentist office note. These attendance codes will allow the school, LEA and OSSE to track when a student returns to school and the length of time the student was excluded.

**8. Can a student in grade pre-K 3, kindergarten, 7, or 11 be moved into distance learning when they are out of compliance for immunizations?**

When a student in grade pre-K 3, kindergarten, 7, or 11 remains out of compliance after the exclusion date specified by OSSE, their attendance must be coded as “unexcused absence – immunization” (AFUI) for any days that are missed. Students should not be placed into a distance learning posture for purposes of non-compliance with immunization requirements.

**9. Do schools need to account for special student populations when implementing the immunization policy?**

As stipulated in Section III of the School Immunization Policy, federal law and DC Official Code protect specific student populations, as detailed below:

- **Military Children:** The District is a member state that enacted the guidelines of the Interstate Compact on Educational Opportunity for Military Children (DC Official Code § 49–1101.01 et seq.). The Compact agreement gives military students 30 calendar days from the date of enrollment to obtain immunization certification (DC Official Code § 49–1101.05(c)).<sup>2</sup> Schools shall ensure military children receive a minimum of 30 calendar days prior to temporarily excluding them based on immunization certification non-compliance. This provision only applies to children of military families enrolled in kindergarten through grade 12 in the household of active duty members of the uniformed services; members or veterans of

the uniformed services who are severely injured and medically discharged or retired for a period of one year after medical discharge or retirement; and members of the uniformed services who have died on active duty or as a result of injuries sustained on active duty for a period of one year after death (DC Official Code § 49–1101.04).

- **Students Experiencing Homelessness:** Federal law requires that a school immediately enroll a student experiencing homelessness, even if the student is unable to produce records normally required for enrollment, such as previous academic records, records of immunization and other required health records, proof of residency, or other documentation (42 US Code § 11432(g)(3)(C)(i)). If the student needs to obtain immunizations or other required health records, the enrolling school shall immediately refer the parent or guardian of the student, or the student him/herself (in the case of an unaccompanied student or adult student), to the LEA or school-based homeless liaison, who shall assist in obtaining necessary immunizations or screenings, or immunization or other required health records (42 US Code § 11432(g)(3)(C)(iii)). Due to federal protections for students experiencing homelessness, schools shall not exclude students experiencing homelessness from school based on immunization certification non-compliance unless the student has been exposed or is at risk of exposure to a communicable disease (DCMR 5-E § 5300.10). If the 20-school day period, or the exclusion date specified by OSSE, passes for a student experiencing homelessness, the school shall continue to work with the LEA or school-based homeless liaison, OSSE, DC Health and the parent, guardian, or student (unaccompanied or adult) to ensure the immunization certification is obtained as soon as possible.
- **Students with Disabilities:** Students with disabilities are not exempt from immunization requirements, and a school shall not permit a student with a disability in grade pre-K 3, kindergarten, 7, or 11 to attend school after the 20-school day period of immunization certification non-compliance, or the exclusion date specified by OSSE, has passed. If a student with an Individualized Education Program (IEP) or a student with a 504 Plan is temporarily excluded from school based on exposure or the threat of exposure to a communicable disease, and the student has a religious or medical exemption on file with the school, the school shall ensure the student continues to receive a free appropriate public education (FAPE) consistent with guidance from the US Department of Education Office for Civil Rights.<sup>3</sup> OSSE provides guidance and technical assistance to schools regarding the provision of FAPE to students with disabilities.

- **Adult and Foreign-Born Students:** The policy applies to any person who seeks admission to school, or for whom admission to school is sought by a parent or guardian, enrolled in grade pre-K through 12 or pursuing an IEP Certificate of Completion, and who will not have attained the age of 26 years by the start of the school term for which admission is sought. Immunization certification for adult and foreign-born students may be difficult to confirm due to immunization paper records no longer existing or the immunizations being administered outside of the United States. These instances may require alternative proof of immunization, including via blood testing. When this occurs, the IPOC and School Health Team should work directly with DC Health to appropriately secure and record the necessary documentation for immunization certification.
- **Transferring Students:** The immunization policy applies to all students identified as stage 5 enrolled (attending school).<sup>4</sup> If a student transfers between schools at any point, it is the responsibility of the newly enrolling school to confirm immunization certification. This includes making reasonable effort to contact the student's previous school. When a School Health Team determines that the transferred student has not met immunization certification requirements, it shall immediately send written notification to the parent, guardian, or adult student and follow protocols as stipulated in Section II of the School Immunization Policy. If a student enrolled in grade pre-K 3, kindergarten, 7, or 11 transfers between two District schools after they have been notified by their previous school for exclusion, the newly enrolling school will restart the notification process outlined in Section II Step 4b of the School Immunization Policy once the student has met stage 5 enrollment and the school has confirmed immunization certification non-compliance. Attempting to coordinate communications for transferring students across two schools, especially those in different LEAs with different school calendars, would create confusion and an administrative burden for both schools, thus the notification and exclusion process will begin again with the newly enrolling school.

**10. Does a parent, guardian, or adult student have due process rights if a student is temporarily excluded based on immunization certification non-compliance?**

There are no due process rights. A student in grade pre-K 3, kindergarten, 7 or 11 is not permitted to attend school after the 20-school day period, or the exclusion date specified by OSSE, has passed due to the health risk posed both to the student and the school population. Conditioning school enrollment on vaccination has long been accepted by courts as a permissible way for states

to inoculate large numbers of young people and prevent the spread of contagious diseases. The failure to meet the District's immunization requirements represents an affirmative decision to opt out of the requirements of the District's public school system. Consequently, while the parent, guardian, or adult student receives appropriate notice and has the ability to respond to such notice, there are no due process rights. The parent, guardian, or adult student is encouraged to remain engaged with the School Health Team and DC Health to ensure immunization certification requirements are met. Schools are recommended to follow communication protocols to ensure they are able to support the decision to temporarily exclude a non-compliant student in grade pre-K 3, kindergarten, 7, or 11 after the 20-school day period, or the exclusion date specified by OSSE, including maintaining records of contact made with the parent, guardian, or adult student.

**11. Which students may be temporarily excluded from school if exposed to a communicable disease?**

If a school has reason to believe a student has been exposed to a communicable disease, such as measles, but the student is not fully immunized, the school shall immediately contact DC Health and discuss appropriate exclusion measures. Temporary exclusion measures may include the temporary exclusion of the exposed student and all other students that are not fully immunized in the school, including in the grades that are not otherwise subject to exclusion. This temporary exclusion may extend to all students non-compliant with immunization certification requirements, students with exemptions (religious and medical), and any military child or student experiencing homelessness who may not be fully immunized. DC Health will determine which students to temporarily exclude from school and when the students will be allowed to return. These students will be temporarily excluded at the direction of the District of Columbia due to quarantine, contagious disease, infection, infestation, or other condition requiring separation from other students. Compliant students' attendance shall be coded as "excused absence – immunization" (AFEI), unless the compliant students receive distance learning while out of in-person activities. Schools shall ensure students with disabilities with an IEP or 504 Plan who have a medical or religious exemption continue to receive FAPE consistent with guidance from the US Department of Education Office for Civil Rights.<sup>5</sup> The school, DC Health, LEA central office (if applicable) and OSSE shall all be informed if an exposure incident results in the temporary exclusion of students.

**12. Is an LEA required to provide special education and related services to students with disabilities who cannot attend school due to non-compliance with immunization requirements?**

Whether the LEA is obligated to provide FAPE, including the provision of special education and related services, depends on the circumstances.

- If a student with a disability does not have a medical or religious exemption or HPV opt-out and is non-compliant with immunization requirements, the LEA is not obligated to ensure the provision of FAPE to the student. Consistent with The School Immunization Policy, the LEA should use the “unexcused absence – immunization” (AFUI) attendance code for non-compliant students in grades pre-K 3, kindergarten, 7 and 11 who are temporarily excluded from school and are not receiving educational services. In the Special Education Data System (SEDS), the LEA should document scheduled related services as “student absent” in service logs.
- If a student is awaiting approval of a religious exemption and the school provides educational services to general education students awaiting approval of religious exemptions, then the LEA must ensure the student with a disability is provided access to the same educational opportunities afforded to other students. Consistent with US Department of Education Office of Civil Rights guidance, the LEA must ensure that students with disabilities continue to receive FAPE.

**13. Is an LEA required to provide compensatory services to a student with a disability who returns after a period of non-attendance due to non-compliance with immunization requirements?**

Consistent with OSSE’s Related Services Policy, when a student with a disability misses services, the LEA must convene an IEP team meeting to consider the impact of the missed service on the student’s progress and performance and ensure the continued provision of FAPE. If the LEA was required to provide FAPE (when a student was awaiting approval of an immunization waiver), the IEP team must determine if compensatory services are necessary. If the LEA was not required to provide FAPE (when a student was noncompliant with immunization requirements and not seeking a waiver), the IEP team must consider the impact of the missed services and review the current IEP to determine if it is necessary to modify the student’s program or placement.

**14. What are an LEA’s obligations for students with disabilities attending nonpublic schools?**

Immunization requirements, attendance policies and FAPE entitlements apply to students with disabilities attending nonpublic schools. Nonpublic schools with questions regarding billing should contact Tessa Haiden at [Tessa.Haiden@dc.gov](mailto:Tessa.Haiden@dc.gov).

**Endnotes**

- 1 DCMR Title 22 Health, Subtitle 22-B Public Health and Medicine. Retrieved from: [hdcregs.dc.gov/Common/DCMR/RuleList.aspx?ChapterNum=22-B1](http://hdcregs.dc.gov/Common/DCMR/RuleList.aspx?ChapterNum=22-B1)
- 2 Stage 5 Enrollment - Student is receiving educational services.
- 3 Addressing the Risk of Measles in Schools while Protecting the Civil Rights of Students with Disabilities; US Department of Education Office of Civil Rights. Retrieved from: [https://rems.ed.gov/docs/ED\\_Measles\\_OCR\\_fact\\_sheet\\_2015-3-6\\_Clean\\_508.pdf#targetText=Under%20Section%20504%20and%20Title,educational%20services%20to%20that%20student](https://rems.ed.gov/docs/ED_Measles_OCR_fact_sheet_2015-3-6_Clean_508.pdf#targetText=Under%20Section%20504%20and%20Title,educational%20services%20to%20that%20student)
- 4 Stage 5 Enrollment – Student is receiving educational services.
- 5 Addressing the Risk of Measles in Schools while Protecting the Civil Rights of Students with Disabilities; US Department of Education Office of Civil Rights. Retrieved from: [https://rems.ed.gov/docs/ED\\_Measles\\_OCR\\_fact\\_sheet\\_2015-3-6\\_Clean\\_508.pdf#targetText=Under%20Section%20504%20and%20Title,educational%20services%20to%20that%20student](https://rems.ed.gov/docs/ED_Measles_OCR_fact_sheet_2015-3-6_Clean_508.pdf#targetText=Under%20Section%20504%20and%20Title,educational%20services%20to%20that%20student)

