Overview

Vaccines are a safe and effective way to prevent the spread of serious disease and keep children healthy as they grow. For each birth cohort vaccinated in the U.S. per the recommended schedule, vaccines save 33,000 lives, prevent 14 million cases of disease, and save $9.9 billion in direct healthcare costs.

All students and school staff deserve a healthy school environment that supports their wellbeing and builds a strong foundation for learning. It takes an entire community to protect against serious disease. Because diseases such as measles can spread rapidly, adequate vaccination coverage at the school level – roughly 95% for each vaccine – helps to protect the health of students, staff and others in the community, including those who cannot be vaccinated for medical reasons or because they are still too young to receive vaccines. This is known as herd immunity or community protection. With national measles cases reaching the highest number in nearly 30 years, it’s crucial that we take steps to protect students and community members from preventable disease.

Did You Know?

- **49th** Colorado ranks last among the 49 states that reported for kindergarten vaccination rates.
- **9,424** Colorado kids were hospitalized or went to an emergency room with vaccine-preventable diseases in 2017.
- **96%** of vaccine exemptions in Colorado are claimed for non-medical reasons.
- **28,874** K-12 students entered Colorado schools in 2017-18 without protection from one or more vaccines.

Why It Matters

- While the large majority of Colorado parents vaccinate, data show there is variation in vaccination coverage across the state. Areas of low vaccination put children – especially young children – and communities at risk for outbreaks, which can spread rapidly in school settings.
- State and local vaccination requirements for school entry are important tools for maintaining high vaccination coverage rates and, in turn, lower rates of dangerous and costly diseases.
- Research shows that states with lenient exemption policies, like Colorado, have higher exemption rates, which can lead to increased risk for vaccine-preventable disease outbreaks.
- Low vaccination rates can be an indicator that families may need help understanding which vaccines their children should have and/or where they can conveniently access free or low-cost vaccines. Research shows vaccine hesitancy is generally not a barrier to vaccination among refugee and immigrant students.
- Ensuring high vaccination rates will reduce absenteeism linked to preventable disease in support of the Every Student Succeeds Act (ESSA).
- Research shows that schools with higher vaccination rates are more likely to have a school nurse supporting immunization efforts.

Vaccination Reporting Policy

Per Colorado law and Board of Health Rule, all licensed schools and child care centers are required to report their immunization and exemption rate information annually to the Colorado Department of Public Health and Environment (CDPHE) to be made publicly available online.

To access the school immunization data, visit [www.covaxrates.org](http://www.covaxrates.org).

### County Level Rates of K-12 Children Fully Immunized with MMR (measles-mumps-rubella), 2018-19

- **80% - 84%**
- **85% - 89%**
- **90% - 94%**
- **≥ 95%**

This information can be viewed for each vaccine on the CDPHE school immunization data site.

Percentage of All Colorado Schools That Meet Healthy People 2020 Goals for Vaccination Coverage, 2018-19

<table>
<thead>
<tr>
<th>Vaccine/Disease</th>
<th>All K-12 Schools</th>
</tr>
</thead>
<tbody>
<tr>
<td>MMR (Measles, Mumps, Rubella)</td>
<td>51%</td>
</tr>
<tr>
<td>Varicella (Chickenpox)</td>
<td>39%</td>
</tr>
<tr>
<td>DTaP (Diphtheria, Tetanus, Pertussis)</td>
<td>58%</td>
</tr>
<tr>
<td>HepB (Hepatitis B)</td>
<td>51%</td>
</tr>
<tr>
<td>Polio</td>
<td>46%</td>
</tr>
<tr>
<td>*Tdap (Tetanus, Diphtheria, Pertussis)</td>
<td>47%</td>
</tr>
</tbody>
</table>

National Healthy People 2020 (HP 2020) goals are to reach 95% coverage for each vaccine (*except Tdap, which is 80%).
How Is My District Doing?**
Total school district enrollment: 771 students
- The percent of students in Garfield County School District 16 fully immunized for each vaccine ranges from 90%-95% depending on the specific vaccine.
- Exemption rates for any vaccine range from 1.8%-7.5% across individual schools, demonstrating variability among schools within the district.
- Depending on the vaccine, between 20 and 49 students in Garfield County School District 16 claimed an exemption.
- Depending on the vaccine, between 18 and 29 students in Garfield County School District 16 have an incomplete or missing record.

What Does This Mean for Our Schools?
Vaccination is important to emergency response efforts and helps to prevent absenteeism, exclusions, and other societal and economic costs. In the event of an outbreak, your school may be required to take measures to protect the student population or community at-large, such as excluding students. These lost days of school have impacts on a student’s education and long-term success.

Case in Point:
Recent Colorado and national cases and outbreaks of vaccine-preventable diseases like measles, mumps, influenza, whooping cough and chickenpox highlight the importance of ensuring the children in Garfield County School District 16 are fully immunized so that they, and the entire community around them, are protected from serious illness. Between the years of 2013-2018, 47 Garfield County students were diagnosed with pertussis (whooping cough). There was at least one case of pertussis reported from Parachute to Carbondale; however, 75% of cases reported came from Carbondale and Glenwood Springs.

Percentage of Garfield County School District 16 Students Fully Immunized By Vaccine, 2018-19*

<table>
<thead>
<tr>
<th>Disease/Vaccine</th>
<th>Fully Immunized</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measles/ MMR</td>
<td>93%</td>
</tr>
<tr>
<td>Mumps/ MMR</td>
<td>93%</td>
</tr>
<tr>
<td>Rubella/ MMR</td>
<td>93%</td>
</tr>
<tr>
<td>Pertussis (Whooping Cough)/ DTaP</td>
<td>93%</td>
</tr>
<tr>
<td>Diphtheria/ DTaP</td>
<td>93%</td>
</tr>
<tr>
<td>Polio/ IPV</td>
<td>93%</td>
</tr>
<tr>
<td>Varicella (Chickenpox)/ VAR</td>
<td>90%</td>
</tr>
</tbody>
</table>

These levels of risk were determined using herd immunity thresholds for each disease in combination with the HP 2020 goals of 95%.

What We Can Do Together
- REMIND students, families and staff of the importance of on-time vaccination and school vaccine requirements.
- BUILD RELATIONSHIPS between school administrators, school nurses and local public health to meet state vaccination requirements.
- PARTNER with other stakeholders to identify opportunities to deliver and/or improve access to vaccines for students, such as supporting school-based health centers and vaccination clinics.
- SEEK SUPPORT AND GUIDANCE from your local public health agency and CDPHE regarding communicable disease control protocol.
- STAY INFORMED of science-based immunization information, as well as what’s happening with vaccine coverage rates and outbreaks in your community and beyond. Vaccine-preventable disease can spread quickly across regions.
- SUPPORT POLICIES that help families access vaccines and ensure appropriate funding for school nurses and resources that save time and money for schools, such as the Colorado Immunization Information System (CIIS).
- ENCOURAGE families to provide accurate vaccination records rather than claim an exemption out of convenience. Assist families in locating their child’s record.

To explore your district’s data using online dashboards and to access related resources and references, visit childrensimmunization.org

---

*These data include both public and private schools that reported data.
†These data include the following school-required vaccines: HepB, MMR, DTaP, Polio, and Varicella.

---

These levels of risk were determined using herd immunity thresholds for each disease in combination with the HP 2020 goals of 95%.