

# **MI-WIC POLICY**

## ***Service Coordination and Outreach***

### **6.0 Service Coordination and Outreach**

*Effective Date: 11/19/15*

#### **6.03 Immunization**

**PURPOSE:** To assure staff assess all WIC enrolled infants' and children's immunization status and refer for immunizations if indicated. WIC staff is to offer women enrollees immunization information and refer to medical providers and/or local health department for immunizations if indicated.

#### **A. POLICY**

1. Local agencies must assess all infants and children for immunization status at certification, recertification and nutrition/health evaluation visits, and refer clients who are not 'up-to-date' to a vaccine provider. Assessment and referral information of infants and children must be documented in the MI-WIC system.
2. Local agencies must assess the infant's or child's immunization status utilizing the current recommended CDC immunization schedule when reviewing a valid immunization record (such as a state immunization record (MCIR) or a physician issued immunization record, when available). See Guidance B. 2. For on-line access to the recommended CDC immunization schedule.
  - (a) The Michigan Care Improvement Registry (MCIR), a computerized registry, provides documented immunization record, and assesses next dose due. MCIR interfaces with MI-WIC to evaluate and load child immunization status to provide WIC staff with assessment data.
  - (b) When the client's immunization status is not available in MI-WIC (i.e. the client's MCIR record could not be found or the parent opted out of MCIR), or is not current in MCIR, another valid immunization record is used for assessment when available. If the client's record is "not found" in MCIR, efforts to resolve name or date of birth discrepancies should be made. See Guidance B. 3. and 4.
  - (c) When infant or child clients are assessed as 'not up-to-date' or no immunization record is available, local agencies will:
    - i. Refer clients to their private medical care provider, health department or an immunization provider for service.
    - ii. Provide information on the recommended immunization schedule, such as the child's individualized MCIR report or recommended immunization guidelines available from CDC. See Guidance B. 2. for Recommended Immunizations for Children (Birth through 6 years).
3. For women enrollees, the local agency staff must offer immunization information appropriate for their age and status, especially in regards to pregnant women. See Guidance B. 2. for

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Recommended Immunization for Adults (19 Years and Older) by Age and Medical Condition.

The MCIR system may assist staff in providing individualized recommendations for standard immunizations for each client. However, the recommendations for pregnant women to receive 3<sup>rd</sup> trimester Tdap or Influenza vaccine may not be noted on a MCIR report as they are specific to her medical condition.

- a. Staff should be aware of the following immunization considerations for women:
  - i. Influenza vaccination is recommended in any trimester for all women who are pregnant or who plan to become pregnant during the influenza season.
  - ii. Pertussis vaccination (Tdap) is recommended between 27 and 36 weeks of each pregnancy. CDC recommends Tdap during the third trimester of every pregnancy, when the highest concentration of maternal antibodies will be transferred to the fetus, allowing for the best protection of the newborn. Infants are especially vulnerable to pertussis (whooping cough) due to their immature immune system and are not fully protected until after the third dose of the initial DTaP series has been provided at about 6 months of age.
4. If a cost exists for immunization services in the clinic, clients must be informed that immunizations services are not required as a part of WIC program participation. WIC funds shall not be used for the purchase or administration of vaccines.
5. In WIC agencies that are under the authority of a local health department, the WIC and Immunization Programs will work cooperatively to establish local agency policy related to WIC/Immunization collaboration.

### **B. GUIDANCE**

1. Local agency immunization collaboration policies may include the following:
  - a. Immunization promotion methodologies
  - b. Coordination of services that addresses:
    - i. Assessment of children's immunization status
    - ii. Provision of recommended vaccination schedules for women, infants and children
    - iii. Referrals for immunization services for clients who are not up to date
    - iv. Administration of vaccines
    - v. Availability of current, client appropriate information regarding childhood and adult vaccine recommendations and descriptions
    - vi. Promotion of education regarding vaccine preventable diseases
  - c. Provision of immunization training for WIC staff

2. Client friendly immunization information and schedules can be accessed at:
  - a. General Information: [www.michigan.gov/immunize](http://www.michigan.gov/immunize)
  - b. Age 0-6 immunization schedules:
    - i. <http://www.cdc.gov/vaccines/parents/downloads/parent-ver-sch-0-6yrs.pdf> (English)
    - ii. <http://www.cdc.gov/vaccines/parents/downloads/parent-ver-sch-0-6yrs-sp.pdf> (Spanish)
  - c. Age 7-18 immunization schedules:  
<https://www.cdc.gov/vaccines/schedules/downloads/teen/parent-version-schedule-7-18yrs.pdf>
  - d. Adult immunization schedules (see Page 2 for pregnancy):  
<https://www.cdc.gov/vaccines/schedules/downloads/adult/adult-combined-schedule.pdf>
  - e. Michigan Vaccine Information Statements are available in English, Spanish, Arabic and other languages at:  
[MDHHS Health Promotions \(healthymichigan.com\)](http://mdhhs.healthpromotions.com)
3. Non-health department WIC agencies are encouraged to collaborate with local health departments within their jurisdiction to promote education regarding vaccine preventable diseases and improve immunization rates.
4. The term ‘Opt-Out’ in MCIR and MI-WIC systems indicate the parents (guardians, or authorized persons) have requested their medical care provider not forward immunization information (for themselves or their infants or children) to MCIR.

#### References:

- USDA - August 29, 2011: Guidance for Providing Quality WIC Nutrition Services During Extended Certification Periods
- USDA - WIC Policy Memorandum #2001-7, Immunization Screening and Referral, September, 2001
- USDA - WIC Policy Memorandum # 95-13, Allowable Costs for Immunization, April 1995
- HHS - <http://www.cdc.gov/flu/pdf/professionals/providers-letter-pregnant-2014.pdf>
- USDA websites regarding WIC Staff training on Immunization screening and referrals:  
<https://www.fns.usda.gov/wic/immunization-screening-and-referral-wic>