Childhood Vaccinations
A Toolkit for Child Care and Early Learning Providers in Washington State
About this Toolkit

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Who is this toolkit for?
If you work with children ages 0-5, this toolkit is for you! No matter your role, vaccinations are probably a popular topic in your conversations with families. This toolkit can help you feel confident responding to questions and addressing concerns.

But I’m not a doctor. Why do I need to be able to answer questions about vaccinations?
• Your advice matters! Parents and caregivers look to you for information and guidance. What you say and how you say it matters.
• Depending on where you work, you might be responsible for ensuring that children are up-to-date on vaccinations and meet state requirements.
• When the children in your care are vaccinated, you benefit too! You and your colleagues are less likely to get sick, miss work, and risk serious illness.

I have questions and concerns about vaccinations too.
Am I really the right messenger?
It’s okay to have questions and feel unsure! When you don’t know how to respond to a parent’s or guardian’s question, just be honest. Let them know you aren’t sure of the answer, and connect them to accurate information from trusted sources. Or tell them you don’t currently have the answer but will get back to them. Then, take some time to educate yourself using the information in this toolkit or by visiting the websites in the “Additional Resources” section.
Vaccines Protect Children from 15 Diseases Before the Start of Kindergarten

It might seem like many of the diseases we vaccinate against are long gone. Even though some of these diseases are rare in the United States, they may be common in other parts of the world. That means they’re just a plane ride away. Vaccination is one of the best ways people can protect themselves and their loved ones from infection and stop these diseases from returning.

As children get older, additional vaccines are recommended. For example, HPV (human papillomavirus) vaccine prevents certain types of cancer. Meningococcal vaccine helps prevent complications like meningitis. You can learn more about vaccines children need at every age here: cdc.gov/vaccines/parents/by-age/

Disease Complications

**Bacteremia:** Infection of the blood  
**Encephalitis:** Swelling of the brain  
**Epiglottitis:** Infection that can block the windpipe and lead to breathing problems  
**Jaundice:** Yellowing of the skin and eyes  
**Meningitis:** Infection and swelling of the covering of the brain and spinal cord  
**Pneumonia:** Infection of the lungs  
**Multi-system inflammatory syndrome:** A condition associated with COVID-19 in which different body parts become inflamed, including the heart, lungs, kidneys, brain, skin, eyes, or gastrointestinal tract
<table>
<thead>
<tr>
<th>Disease</th>
<th>Vaccine</th>
<th>How This Disease Spreads</th>
<th>Disease Symptoms</th>
<th>Disease Complications</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chickenpox</td>
<td>Varicella</td>
<td>Air, direct contact</td>
<td>Rash, headache, tiredness, fever</td>
<td>Infected blisters, bleeding disorders, encephalitis, pneumonia, death</td>
</tr>
<tr>
<td>Coronavirus Disease 2019</td>
<td>COVID-19</td>
<td>Air, direct contact</td>
<td>May have no symptoms, fever, muscle aches, sore throat, runny nose, diarrhea, vomiting, loss of taste or smell</td>
<td>Pneumonia, respiratory failure, blood clots, bleeding disorders, injury to liver, heart or kidney, multi-system inflammatory syndrome, post-COVID syndrome (long COVID), death</td>
</tr>
<tr>
<td>Diphtheria</td>
<td>DTaP/Tdap*</td>
<td>Air, direct contact</td>
<td>Sore throat, mild fever, weakness, swollen glands in neck</td>
<td>Swelling of the heart muscle, heart failure, blocked airways or suffocation, coma, paralysis, death</td>
</tr>
<tr>
<td>Haemophilus influenza type b</td>
<td>Hib</td>
<td>Air, direct contact</td>
<td>May have no symptoms unless bacteria enter the blood</td>
<td>Meningitis, intellectual disability, epiglottitis, pneumonia, death</td>
</tr>
<tr>
<td>Hepatitis A</td>
<td>HepA</td>
<td>Direct contact, contaminated food or water</td>
<td>May have no symptoms, fever, stomach pain, loss of appetite, fatigue, vomiting, jaundice, dark urine</td>
<td>Liver failure, joint pain, kidney, pancreatic and blood disorders, death</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>HepB</td>
<td>Contact with blood or body fluids</td>
<td>May have no symptoms, fever, headache, weakness, vomiting, jaundice, joint pain</td>
<td>Chronic liver infection, liver failure, liver cancer, death</td>
</tr>
<tr>
<td>Influenza</td>
<td>Flu</td>
<td>Air, direct contact</td>
<td>Fever, muscle pain, sore throat, cough, extreme fatigue</td>
<td>Pneumonia, bronchitis, sinus infections, ear infections, death</td>
</tr>
<tr>
<td>Measles</td>
<td>MMR*</td>
<td>Air, direct contact</td>
<td>Rash, fever, cough, runny nose, pink eye</td>
<td>Encephalitis, pneumonia, death</td>
</tr>
<tr>
<td>Mumps</td>
<td>MMR*</td>
<td>Air, direct contact</td>
<td>Swollen salivary glands (under the jaw), fever, headache, tiredness, muscle pain</td>
<td>Meningitis, encephalitis, inflammation of testicles or ovaries, deafness, death</td>
</tr>
<tr>
<td>Pertussis (aka whooping cough)</td>
<td>DTaP/Tdap*</td>
<td>Air, direct contact</td>
<td>Severe cough, runny nose, apnea (a pause in breathing in infants)</td>
<td>Pneumonia, death</td>
</tr>
<tr>
<td>Pneumococcal disease</td>
<td>PCV</td>
<td>Air, direct contact</td>
<td>May have no symptoms, pneumonia</td>
<td>Bacteremia, meningitis, death</td>
</tr>
<tr>
<td>Polio</td>
<td>IPV</td>
<td>Air, direct contact</td>
<td>May have no symptoms, sore throat, fever, nausea, headache</td>
<td>Paralysis, death</td>
</tr>
<tr>
<td>Rotavirus</td>
<td>RV</td>
<td>Through the mouth</td>
<td>Diarrhea, fever, vomiting</td>
<td>Severe diarrhea, dehydration, death</td>
</tr>
<tr>
<td>Rubella</td>
<td>MMR*</td>
<td>Air, direct contact, through the mouth</td>
<td>Sometimes rash, fever, swollen lymph nodes</td>
<td>In pregnancy, can lead to miscarriage, stillbirth, premature delivery, birth defects</td>
</tr>
<tr>
<td>Tetanus</td>
<td>DTaP/Tdap*</td>
<td>Exposure through cuts in skin</td>
<td>Stiffness in neck and abdominal muscles, difficulty swallowing, muscle spasms, fever</td>
<td>Broken bones, breathing difficulty, death</td>
</tr>
</tbody>
</table>

*MMR* combines measles, mumps, and rubella  
*DTaP and Tdap* combines diphtheria, tetanus, and pertussis. DTaP is recommended for children.
Child Care and School Vaccination Requirements

**Recommended versus required: what’s the difference?**

**Recommended vaccines:** Children need all recommended vaccines to have the best protection from serious diseases. A group called the Advisory Committee on Immunization Practices (ACIP) develops vaccine recommendations for the United States. The ACIP is made up of experts in medical and public health fields. Some vaccines are recommended for everyone. Others may only be recommended for certain people based on their age or other risk factors.

Find immunization charts for children 6 years and younger on the CDC website (English and Spanish): [cdc.gov/vaccines/schedules/easy-to-read](http://cdc.gov/vaccines/schedules/easy-to-read)

**Required vaccines:** Vaccine requirements protect children, families, and communities from diseases that can easily spread in schools. In Washington State, the State Board of Health decides which vaccines are required for children to attend school and child care. The State Board of Health is made up of medical and public health experts. During a disease outbreak, the Health Officer from a Local Health Department may also issue vaccine requirements.

Children may not be able to begin attending school or child care if they are not up-to-date on vaccinations and do not have a Certificate of Exemption on file. Additionally, children missing vaccinations may be excluded from school or child care if an outbreak occurs.

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### What vaccines are required for child care and school in Washington State?

**Find charts showing vaccine requirements:**
- For families (16 languages available): [doh.wa.gov/vaxtoschool](http://doh.wa.gov/vaxtoschool)
- For child care providers and school staff (English and Spanish only): [doh.wa.gov/scci](http://doh.wa.gov/scci)

**Child care and preschool immunization reporting requirements**

Child cares and preschools must complete and file an immunization status report to the Department of Health by November 1 of each year.

**Reporting is required for:**
- Licensed child care centers with 13 or more children
- Preschools located at a public or private school
- Head Start and ECEAP programs

**Reporting is optional for:**
- Licensed family home child care providers with 12 or fewer children
- Private preschools not located at a public or private school
- Co-Op preschools

As children get older, additional vaccines are recommended.

For example, HPV (human papillomavirus) vaccine prevents certain types of cancer. Meningococcal vaccine helps prevent complications like meningitis.

You can learn more about vaccines children need at every age here: [cdc.gov/vaccines/parents/by-age/](http://cdc.gov/vaccines/parents/by-age/)

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For more information on how to report for preschool and child care, visit [doh.wa.gov/scci](http://doh.wa.gov/scci).

Have questions or need further assistance with reporting? Email OICPSchools@doh.wa.gov
Required documents for school, child care, and early learning programs

Certificate of Immunization Status (CIS)
Before a child may attend school or child care, the family must provide a Certificate of Immunization Status (CIS) form to staff. This form shows the child’s vaccinations or proof of immunity to disease.

There are a few ways families can submit a valid CIS form:
• Families can print their child’s CIS by following the instructions on the Access your Family’s Immunization Information web page (available in English and Spanish): doh.wa.gov/immsrecords
• Families can ask a health care provider to print out a CIS form for them.
• Families can ask if their school is able to print out a CIS form for them.
• Families can fill out the CIS form themselves and attach medical records showing vaccination.

Certificate of Exemption (COE)
Washington State law allows families to exempt their child from school or child care immunization requirements. There are four types of exemptions:

Medical: A health care provider may grant a medical exemption only if, in their judgment, the vaccine is not advisable for the child. When the reason for the medical exemption is no longer valid, the child must get vaccinated.

Personal/Philosophical: The parent or guardian has a personal or philosophical objection to a vaccine. The parent or guardian does not need to explain their belief. A personal/philosophical exemption cannot be used for the MMR (measles, mumps, rubella) vaccine.

Religious: The parent or guardian has a religious belief that goes against giving the vaccine to their child. The parent or guardian does not need to explain their belief.

Religious Membership: The parent or guardian belongs to a religious group that does not allow medical treatment of any type by a health care provider. School, preschool and child care staff do not need to verify the religious beliefs of the parent or guardian. This exemption does not need a healthcare provider’s signature.
If families want to claim a medical, personal, or religious exemption, they must fill out a Certificate of Exemption (COE) form and visit a healthcare provider. The provider must discuss the benefits and risks of immunizations with the family and sign the form. The provider must be a Medical Doctor (MD), Doctor of Osteopathy (DO), Naturopathic Doctor (ND), Advanced Registered Nurse Practitioner (ARNP), or Physician Assistant (PA), and the provider must be licensed in Washington State.

Certificates of Immunization and Certificates of Exemption are available in 17 languages at: www.doh.wa.gov/vaxtoschool

**Families can access their children’s immunization information.**

**Here’s how:**

**OPTION 1:** Sign up for MyIR to view, download, and print your family’s immunization information. This information can be used for school and child care immunization requirements.

**OPTION 2:** Sign up for MyIR Mobile at MyIRmobile.com (English only) to view and print immunization information.

**OPTION 3:** Visit your local pharmacy, clinic, or school and request the immunization records.

**OPTION 4:** Request a complete immunization record from your healthcare provider.

**OPTION 5:** Request a complete immunization record from the Department of Health. Call 1-866-397-0337.

For more information on accessing immunization records, visit: www.doh.wa.gov/immsrecords
“Too many shots, too soon”
• A scraped knee is probably a bigger challenge for a child’s immune system than all childhood vaccines combined.
• Children have contact with antigens every day. Antigens are the parts of germs that make the immune system work. They are in the food we eat, the water we drink, and the air we breathe.
• Giving several vaccines at once doesn’t damage, weaken, or overload the immune system. Instead, vaccines help strengthen a child’s immune system by teaching it how to fight off infectious disease.

“Wouldn’t it be better to follow an alternative schedule?”
• Many of the diseases vaccines prevent are the most severe in infants and young children. Childhood vaccine schedules are very carefully designed to protect children as soon as it is safe and effective to do so.

“Kids today are getting more shots than ever.”
• Vaccines are simpler than they were a generation ago!
• In the early 1990s, children received vaccines that protected against eight diseases and contained more than 3000 antigens (bacterial and viral proteins). Today, children receive vaccines that protect against 14 diseases and contain only 305 antigens.

“Isn’t natural immunity from infection better?”
• The diseases we prevent through vaccination are not mild. They can cause severe illness that can lead to life-long complications and even death.
• Medications are often necessary when a child is sick, but they can have side effects and risks.

“Is there any link between vaccines and autism?”
• Vaccines do not cause autism.
• This myth is based on ONE dishonest study from 1998 run by a doctor looking to make a profit. He lost his medical license and the study was withdrawn from the journal where it was published.
• Since then, no one - not even that doctor - has been able to show a link between vaccines and autism.

“But my nephew was diagnosed with autism right after he got vaccinated.”
• One of the criteria doctors use to diagnose autism is a language delay. Since babies under a year don’t usually have words, doctors wait until 15 to 18 months to confirm a language delay and make an autism diagnosis. That’s about the same time babies get shots. This is a coincidence.
• Here’s another way to think about it: babies often begin walking around 12-15 months, which is when certain vaccines are recommended. We’d never say that vaccines cause walking!
Tips for Talking with Vaccine Hesitant Families

Don’t debate, just relate

• Take time to listen. Restate a caregiver’s concerns. Use phrases like, “I’m hearing you say that…”

• Be compassionate, show empathy, and be genuinely curious about the reasons why the caregiver feels the way they do.

• Be sensitive to culture, family dynamics, and circumstances that may influence how a person thinks about vaccines.

• Let people know that having questions and concerns are normal and that you want them to have accurate information from credible sources so they can make the best decision for themselves and their family.

• Invite and welcome questions.

• Talk about the science AND share personal stories. Both too much and too little science can be frustrating. Use your knowledge of the family to decide how much science to bring into the conversation.

• Acknowledge benefits and risks. Honestly discuss possible side effects and the risks of not vaccinating.

• Stay within your knowledge base. If you don’t know the answer to a caregiver’s question, consider connecting them to accurate information from trusted sources. Or tell them that you don’t currently have the answer but will get back to them.

• Respect parental authority. Focus on building partnership and trust.

• Make sure any information you give is in the family’s preferred language. Where possible, offer a variety of formats (e.g. print, video) to accommodate different learning styles and literacy levels.

• Don’t give up! Even if a family seems closed off to the idea of vaccinations, gently keep the conversation going. They might change their minds over time.
Addressing Myths

**Focus on the facts, not the myth.** When a myth is repeated, it becomes stronger. Anytime you mention a myth, always be sure to clearly state that the myth is false.

**Replace myths with a different, fact-based explanation.** Rather than explaining all the reasons a myth is wrong, share new information that addresses the person’s concerns. For example:

**Myth:** “The flu vaccine causes the flu.”
**Different explanation:** “It takes about two weeks for a person’s body to build immunity after getting a vaccination. Let’s say someone’s exposed to the flu a few days before getting vaccinated or up to two weeks afterward. It’s possible for them to still catch the flu since they won’t have full protection from the vaccine yet.”

**Keep it simple.** Providing too many arguments for why a myth is wrong can make things more confusing. It’s helpful for you to be aware of all the reasons a myth is wrong, but be selective about which facts you choose to share with families. More is not always better.

**Always keep in mind: people have legitimate reasons to distrust.** Immigrants and refugees and their families may have been harmed by medical systems. This is also true for many people of color in the U.S. Respond compassionately. Try to give families credible information so that they can make informed decisions for themselves.

Which Sites Should I Trust Online?

With so much information online, it can be tricky to sort out fact from fiction. Here are a few tips to help you decide what information to trust.

- **Use social media for fun,** not information.
- **Think critically:**
  - Who is the author? What are their credentials? Are they trying to sell you something?
  - Is the content legitimate? Look at its sources – are they real? Are they credible?
  - Is the content biased? Is the author trying to appeal to your emotions instead of sharing facts?
- **Look for expertise.** Just being a doctor doesn’t make a person an expert in vaccines. While a pediatrician probably knows a lot about vaccines, a dermatologist may not.
- **Check the links.** Trustworthy websites will often lead to other trustworthy websites. If a site links somewhere random, be skeptical.
- **Check the dates.** Trustworthy websites usually make sure their content is up-to-date.

For more tips, visit: voicesforvaccines.org/credible-info
Additional Resources

Vaccine science, tools, and communication resources:
• Vaccinate Your Family: vaccinateyourfamily.org
• Immunity Community: immunitycommunitywa.org
• Centers for Disease Control and Prevention: cdc.gov/vaccines
• American Academy of Pediatrics: aap.org/en/patient-care/immunizations
• National Resource Center for Refugees, Immigrants, and Migrants: nrcrim.org/vaccines/vaccine-central
• Voices for Vaccines: voicesforyvaccines.org
• Immunize.org: immunize.org
• Children’s Hospital of Philadelphia Vaccine Education Center: chop.edu/centers-programs/vaccine-education-center

Child care and school immunization information:
• School and Child Care Immunizations Information for Families | Washington State Department of Health: https://doh.wa.gov/vaxtoschool
• School and Child Care Immunization Information for Educators and Child Care Providers| Washington State Department of Health: https://doh.wa.gov/scci
• Individual Vaccines Requirements Summary. A guide for educators and child care providers. Includes guidelines on immunizations required for child care and school entry in Washington State). Find link at: https://doh.wa.gov/scci

Resources for finding vaccinations and getting health insurance:
• Find a provider: In Washington State, all children up to age 18 can get vaccines at no charge from healthcare providers participating in the Childhood Vaccine Program (CVP). Providers may charge an administration fee, but this fee can be waived if needed. Usually, healthcare providers require children to enroll as patients. Families should contact the provider of their choice for more information. Search for providers here: https://fortress.wa.gov/doh/vaccinemap
• Community Health Access Program: A telephone assistance program serving King County. Connects residents to health insurance, health care services and other resources. CHAP services are free and confidential. Call 1-800-756-5437 or email chap@kingcounty.gov. More info at kingcounty.gov/chap.
• Find a Clinic: A list of vaccination options for King County residents. Available at: kingcounty.gov/findaclinic
• ParentHelp123.org: Information about state-sponsored health insurance, food programs, and a wide variety of other resources. Available at: parenthelp123.org.
Adapted from website, CDC, Talking with Patients about COVID-19 Vaccinations

Adapted from website, Voices for Vaccines: How do we combat disinformation?

Sources


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• Talking with Patients about COVID Vaccinations. CDC. Available online: www.cdc.gov/vaccines/covid-19/hcp/engaging-patients.html

• Brown A. Clear Answers and Smart Advice About Your Baby’s Shots. Available online: https://www.immunize.org/catg.d/p2068.pdf

• Children’s Hospital of Philadelphia (CHOP) https://media.chop.edu/data/files/pdfs/vaccine-education-center-toomany-vaccines.pdf


• How the vaccine crisis was meant to make money. BMJ. 2011;342:c5258. Available online: https://www.bmj.com/content/342/bmj.c5258

• How the case against the MMR vaccine was fixed. BMJ. 2011;342:c5347. Available online: https://www.bmj.com/content/342/bmj.c5347