## Successful Enforcement of an Immunization Law

GEORGE S. LOVEJOY, MD, JAMES W. GIANDELIA, and MILDRED HICKS

Dr. Lovejoy is director and Mrs. Hicks is information supervisor, Memphis and Shelby County Health Department, Memphis, Tenn. Mr. Giandelia, a Center for Disease Control public health adviser, is now with the Ohio Department of Health, Columbus. Tearsheet requests to Mildred Hicks, Memphis and Shelby County Health Department, 814 Jefferson Ave., Memphis, Tenn. 38105.

IN NOVEMBER 1973, Shelby County became the first county in Tennessee to comply fully with a State-enacted immunization law (act), passed 6 years earlier, which required children who are entering nursery school, kindergarten, or the first grade to show proof of immunization against diphtheria, whooping cough, tetanus, poliomyelitis, measles, and rubella. One-fifth of Tennessee's population resides in Shelby County which encompasses Memphis (the largest city in the State, with the 10th largest public school system in the United States) and five other incorporated municipalities.

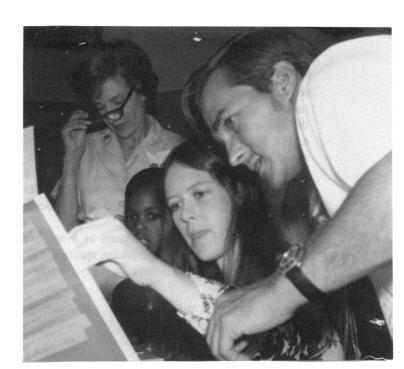
Compliance was achieved by the following actions:

- 1. Passage of unanimous resolutions by the Memphis Board of Education, the Shelby County Board of Education, and the Memphis and Shelby Board of Health to abide by the law beginning in 1973 and thereafter.
- 2. Naming elementary school principals as the responsible authorities to exclude unimmunized children and those without proof of immunization from school.
- 3. Identifying unimmunized children attending schools in violation of the act.
- 4. Applying pressure and warning school principals that court action would be taken against them if they failed to comply with the act.

## **Summer Immunization Campaign**

Although the schools are legally responsible for enforcing the act, the Memphis and Shelby County Health Department assumed this responsibility with the full backing of the boards of education and health.

In May 1973, a plan was drawn by the director of the health department and a public health adviser from the Center for Disease Control, Atlanta, Ga., who was assigned to the department through the Tennessee Department of Public Health. The plan called for obtaining board of education and board of health resolutions of intent to enforce the act; convening a community advisory panel to obtain suggestions of all possible ways to get children immunized; and conducting an intensive summer-long immunization campaign. The public would be fully warned that children without proof of immunization would be refused admission to school, and school principals would be directed not to admit such children to school.



After the schools opened in the fall, a survey would be conducted and school principals would be advised to expel any children attending in violation of the act.

Traditionally, the health department has conducted summer immunization campaigns. A preliminary random survey of 2-year-olds in 1972 had indicated a good general level of immunization (85 percent) with low levels in certain geographic areas, some children completely unimmunized, and the greatest number of partially immunized children in need of immunization against measles and rubella. Also in 1972, a sample survey of 2,211 kindergarten and first-grade children at 22 schools had revealed 350 children without immunization records. Many children had incomplete records; the greatest deficiency being 129 without rubella and 90 without measles immunizations.

The 1973 summer immunization campaign was the most intensive ever undertaken by the department. More than 50,000 immunization notices were sent to parents from the schools. The news media cooperated fully during the campaign, and several suggestions made by the advisory panel which met in May were implemented, including one for a mobile clinic to visit housing projects. This effort received enthusiastic response. Flyers announcing the mobile units half-day visit we're distributed in advance at each housing project, and the schedule was announced by the news media. The unit cruised through the project area with a loudspeaker inviting all to come to the

parking lot for free school immunizations. Bubble gum, balloons, immunizations, and immunization records were given to those attending. Three special Sunday clinics were arranged for August, the final one to be held on the day before school opened, so that all immunizations could be completed.

Response to these efforts was only moderate, and a count of immunizations given during the summer indicated that the immunization level remained unchanged. There was no evidence, however, that large numbers of incompletely immunized children were refused admission to school.

After school opened, the public health adviser began a survey of elementary schools. By October 4, he had checked 39 schools and found 31 with various violations. Announcement of a nationwide preschool "Immunization Action Month" in October reinforced the determination to follow through on excluding unimmunized children from the schools. To accomplish this, a definite enforcement policy and additional staff to complete the job of checking the schools were needed.

## **Enforcement**

At this point, a four-step enforcement program was designed, and it was approved by the boards of education and health. Briefly, the four steps to be followed were:

1. Employ a team to survey the immunization records of children in the kindergartens and first grades of all public, private, and church-related schools.

Microfiche equipment helped in retrieval of immunization records and identification of unimmunized children. James Giandelia (right) public health adviser, demonstrated use of the equipment.

At housing projects, bubble gum, balloons, and immunization were given from a mobile unit



- 2. Send letters to principals of schools in violation, instructing them to comply with the law.
- 3. Upon recheck of the records, send citation letters to principals of schools still in violation, ordering them to expel unimmunized children and stating that failure to comply with the law may be followed by court action.
- 4. Upon second recheck, have principals of schools still not in compliance served with a court summons

On October 16, four registered nurses, temporarily employed, began the school survey. Within a 3-week period, 236 schools were visited and more than 18,000 records were checked. Each nurse averaged 8 to 13 schools per day and found violations at half of the county schools and onefourth of the city schools. Many of the violations could be corrected immediately. At the 78 schools still in violation, the average percentage of children with incomplete records was 13.4. Principals of these schools were sent letters which named the children in violation, stressed the importance of complying with the law, and promised a recheck of the records within 10 days. The letters were signed by the public health adviser.

During the time the records were being checked. the nurses and public health adviser met with teachers, principals, and parents to explain immunization requirements. They spent a great deal of time assisting schools and parents in their efforts to meet requirements.

A volunteer organization examined records of all the children in one elementary school and found immunizations so incomplete that they requested and were provided a special immunization clinic for the school. More than 1,000 immunizations were given to children in grades 1 through 6 in 1 day. Conceivably, the school could have been the scene of an outbreak of measles or rubella.

It was gratifying upon rechecking the schools to find that the proportion of children without complete records had dropped to 5 percent. Children without measles and rubella immunizations had dropped from 7 to less than 1 percent.

In spite of these good results, in early November 28 citation letters were sent from the health department to principals of schools where violations still existed. The letters quoted the State act, directed principals to expel children in violation. named the children to be expelled, and warned. "This department will recheck the school's records within a short time, and if children are found to be attending in violation of the above State Act, court action may be instituted."

These letters, signed by the director of the department, brought prompt compliance in all but three schools. Exertion of additional effort and pressure, but not court action, brought the last three schools into compliance. On November 17, every known public, private, and church-related school in Memphis and Shelby County was in full compliance with the Tennessee preschool immunization law.



A final clinic was held on Sunday, the day before school opened. Gladys Amis, LPN (left), and Rose Hill, PHN (standing), assisted at one of the health centers