

Menasha aldermen occasionally attend meetings of this body. It is possible that a quorum of Common Council, Board of Public Works, Administration Committee, Personnel Committee may be attending this meeting. (No official action of any of those bodies will be taken).

**CITY OF MENASHA  
BOARD OF HEALTH  
Menasha Health Department  
100 Main Street, Menasha  
April 9, 2021 8:00 AM  
Board of Health Meeting  
AGENDA**

**1. Join the meeting from your computer, tablet or smartphone.**

<https://www.gotomeet.me/healthd>

**2. Dial in using your phone.**

United States: [+1 \(646\) 749-3129](tel:+16467493129)

**Access Code:** 716-720-541

**Audio PIN:** When prompted, press #

CALL TO ORDER

- A. ROLL CALL/EXCUSED ABSENCES
- B. MINUTES TO APPROVE
  - 1. BOH Meeting Minutes January 8, 2021 and February 12,2021
- C. REPORT OF DEPT HEADS/STAFF/CONSULTANTS
  - 1. Administrative
    - a. Health Department
      - i. COVID-19 Presentation
      - ii. Budget and Contracts Updates
        - a. Contract updates
    - b. Personnel
      - i. Welcome: Larissa Keller, Office Coordinator
      - ii. Welcome: Susan Penniston, RN, BSN Vaccinator
    - c. Community Health Assessment
    - d. Academic Affiliation Updates
      - i. University of Wisconsin Green Bay
        - a. Spring Placement RN to BSN
        - b. Summer Placement RN to BSN
      - ii. University of Wisconsin Oshkosh
        - a. BSN students – Jodi Koplitz, MSN, RN, Instructor
      - iii. Fox Valley Technical College
      - iv. Rasmussen College
      - v. Western Global University
  - 2. Employee Safety
  - 3. Sealer of Weights and Measures
  - 4. Environmental Health
  - 5. Public Health Department
    - a. Communicable Disease Report: February, March 2021
  - 6. Health Screening 60+
  - 7. Prevention
  - 8. Contact Tracing

"Menasha is committed to its diverse population. Our Non-English speaking population and those with disabilities are invited to contact the Menasha Health Department at 967-3520 at least 24-hours in advance of the meeting for the City to arrange special accommodations."

Board of Health Members: Kristene Stacker, Nancy McKenney, Dr. Teresa Rudolph, Candyce Rusin,

a. Student Antigen Testing

9. School Health Aides
10. Dental Program (screening, fluoride varnish, Children and Youth with Special Healthcare Needs)
11. Communicable Disease
12. Lead Safe Menasha
13. Lead Prevention
14. Immunization
  - a. COVID-19 Vaccination
  - b. Vaccination Planning
    - i. Business requests
    - ii. High School Children 16+
    - iii. Underserved residents
15. Maternal and Child Health
16. Dental Sealants
17. Response to Opioid Crisis
18. Bioterrorism/Emergency Preparedness
19. Twenty Four/Seven
20. Senior Center
21. COVID-19 Testing Coordinator
22. Vaccinators

D. ACTION ITEMS

Policies and Procedures

- Vaccination Consent for Immunization of Minors

- E. ADJOURNMENT - Next Meeting: May 14, 2021 8:00 AM – Virtual Option  
Menasha Health Department 100 Main Street, Suite 100 Menasha, WI

# Cumulative Report

Date Type: Create

Date Range: 02/01/2021 to 02/28/2021

Incident Jurisdiction:

Health Jurisdiction: Health Jurisdiction

Outbreak Jurisdiction:

Transmission Status:

Resolution Status: Suspect, Confirmed, Probable

Process Status:

Prepared By: WEDSS (Preparer's Title)

Telephone: 9885297959

Fax: 9848999801

<u>Disease Name</u>	<u>Number of Incidents</u>
CHLAMYDIA TRACHOMATIS INFECTION	7
CORONAVIRUS, NOVEL 2019 (COVID-19)	88
CORONAVIRUS, NOVEL 2019 (COVID-19) REINFECTION INVESTIGATION	2
GONORRHEA	1
KAWASAKI DISEASE	1
LYME LABORATORY REPORT	3
MULTISYSTEM INFLAMMATORY SYNDROME IN CHILDREN (MIS-C)	1
STREPTOCOCCAL DISEASE, INVASIVE, GROUP B	1
TUBERCULOSIS, LTBI - LABORATORY RESULTS ONLY	2

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## **Outbreak / Investigations**

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<u>Outbreak / Investigation Type</u>	<u>Number of Outbreak / Investigations</u>
Diarrhea of the Newborn	1
Other	227

Information contained on this form or report which would permit identification of any individual has been collected with a guarantee that it will be held in strict confidence, will be used only for surveillance purposes, and will not be disclosed or released without the consent of the individual in accordance with Section 308(d) of the Public Health Service Act (42 U.S.C. 242m).

# Cumulative Report

Date Type: Closed

Date Range: 03/01/2021 to 03/31/2021

Incident Jurisdiction:

Health Jurisdiction: Health Jurisdiction

Outbreak Jurisdiction:

Transmission Status:

Resolution Status: Suspect, Confirmed, Probable

Process Status:

Prepared By: WEDSS (Preparer's Title)

Telephone: 9885297959

Fax: 9848999801

<u>Disease Name</u>	<u>Number of Incidents</u>
CHLAMYDIA TRACHOMATIS INFECTION	15
CORONAVIRUS, NOVEL 2019 (COVID-19)	264
CORONAVIRUS, NOVEL 2019 (COVID-19) REINFECTION INVESTIGATION	4
GONORRHEA	3
HEPATITIS C (Only for non-acute cases first reported before 2016)	2
HEPATITIS C, ACUTE	1
HEPATITIS C, CHRONIC	6
MULTISYSTEM INFLAMMATORY SYNDROME IN CHILDREN (MIS-C)	1
SALMONELLOSIS	2
SYPHILIS, EARLY NON-PRIMARY, NON-SECONDARY	1

Information contained on this form or report which would permit identification of any individual has been collected with a guarantee that it will be held in strict confidence, will be used only for surveillance purposes, and will not be disclosed or released without the consent of the individual in accordance with Section 308(d) of the Public Health Service Act (42 U.S.C. 242m).

**APPENDIX C: VACCINE CONSENT FOR IMMUNIZATION OF MINORS**

**DIVISION OF PUBLIC HEALTH**

1 WEST WILSON STREET  
PO BOX 2659  
MADISON WI 53701-2659

Telephone: 608-266-1251  
Fax: 608-267-2832  
TTY: 711 or 800-947-3529

**Tony Evers**  
Governor



**State of Wisconsin**  
Department of Health Services

**Andrea Palm**  
Secretary

February 18, 2019

Dear Health Officer,

A major barrier to childhood immunization faced by some parents is their inability to attend a public health immunization clinic during working hours. As a result, a minor may present for an immunization unaccompanied or accompanied by an individual who is not the parent, guardian, or legal custodian. Although this is not necessarily a common occurrence in local health departments (LHD), and parents should continue to be encouraged to attend the clinic with their children, the enclosed Template Policy and Procedure for Local Health Departments on Vaccine Consent for Immunization of Minors was prepared in response to increasing questions on this topic.

The Template was developed in consultation with the Office of Legal Counsel of the Department of Health Services and is provided for your consideration. It should serve as a starting point for discussion between the local health officer, public health nurse, medical advisor, and LHD legal counsel to address the need to establish a local policy and procedure. It is the expectation of the Immunization Program that LHDs will decide whether minors will be immunized without the parent, guardian, or legal custodian being present. If you develop such a policy and procedure, it should become an appendix to your Immunization Clinic Policy and Procedure Manual. Because this is a local decision, it is not necessary to resubmit your signed Medical Orders or Approval Sheet to the chief medical officer and state epidemiologist for communicable diseases for approval.

Sincerely,

Handwritten signature of Stephanie Schauer in cursive.

Stephanie Schauer, Ph.D.  
Immunization Program Manager  
Wisconsin Immunization Program

## **Template Policy and Procedure for Local Health Departments Vaccine Consent for Immunization of Minors**

### **Policy Statement**

The local health department (LHD) supports the belief that parents/guardians/legal custodians should be present when their minor child(ren) receives a vaccine. The LHD is cognizant that situations can and do occur when the parent/guardian/legal custodian cannot be present. This can serve as a barrier to receiving needed immunizations for their minor child(ren). In order to reduce and eliminate this barrier, this policy allows for vaccines to be administered to a minor when a parent/guardian/legal custodian is not physically present at the time of vaccination. In order for this to occur, the public health nurse shall assure and document that the parent/ guardian/legal custodian: 1) has requested the appropriate vaccine(s); 2) has had an opportunity to provide information about allergies and contraindications/precautions; and 3) understands the minor and major adverse events that may occur as a result of the immunization. There are no federal or state laws requiring a signature of a parent/guardian/legal custodian for immunization of a minor.

### **Procedure**

- A. Any minor under the age of 18 years should be accompanied by a parent/guardian/legal custodian.
- B. If a parent/guardian/legal custodian cannot accompany their minor child, the individual accompanying the minor should present written and signed permission from the parent/guardian/legal custodian. This permission must meet the following conditions:
  1. Request appropriate vaccine(s) to be administered.
  2. List any contraindications and allergies.
  3. Demonstrate understanding of potential adverse events of immunization of the minor child.

Use of the Vaccine(s) Administration Record (F-44702) fulfills this requirement.

- C. The public health nurse is responsible for assessing and evaluating whether the signed permission demonstrates understanding of the three conditions (in B) above. The public health nurse will then do one of the following:
  1. If the public health nurse determines that the conditions (in B) above are met, the public health nurse will:
    - a. Complete the Vaccine(s) Administration Record.
    - b. Attach the signed parent/guardian/legal custodian written permission to the Vaccine(s) Administration Record and on the signature line write in "see attached permission from parent/guardian/legal custodian."
  2. If the public health nurse determines that the conditions (in B) above are NOT met on the signed permission form, the public health nurse will attempt to contact the parent/guardian/legal custodian by phone. If contact is not made, vaccines will not be administered. If contact is made, the public health nurse will:
    - a. Describe who is with the minor child.
    - b. Determine if it is the intention of the parent/guardian/legal custodian to have their minor child vaccinated.
    - c. If the public health nurse determines that the parent/guardian/legal custodian does not want the child immunized, vaccines will not be administered.
    - d. If the public health nurse determines that the parent/guardian/legal custodian wants their minor child immunized and the conditions (in B) above are met, the public health nurse will:

- i. Complete the Vaccine(s) Administration Record.
- ii. Document the phone call on the Vaccine(s) Administration Record including the date, time, contact person, assessment, and evaluation of parent/guardian/legal custodian's understanding and verbal consent to immunize.
- iii. Attach the parent/guardian/legal custodian written permission to the Vaccine(s) Administration Record and on the signature line write in "phone call to parent/guardian/legal custodian."
- iv. Administer the vaccine(s) according to agency policy and procedure.

**D. Public health situation applications**

1. Accompanied minor without permission: If a minor is accompanied by an individual who is not the parent/guardian/legal custodian and does not have written and signed permission from the parent/guardian/legal custodian, the public health nurse will follow all steps described in C.2 above.
2. Unaccompanied minor without permission: If a minor is unaccompanied and does not have written and signed permission from the parent/guardian/legal custodian, the public health nurse will follow C.2 above or determine if the minor is an emancipated minor. An example of such a minor eligible for assessment might be a married teen or teen parent. If the minor appears to be an emancipated minor, the emancipated minor could sign for him/herself. There are no federal or state laws requiring a signature of a parent/guardian/legal custodian for immunization of a minor.
3. Minor foster child(ren): Due to the many ways in which children come into foster care services, it is impossible to generalize. These situations should be handled on a case-by-case basis using the following general guidelines:
  - a. The public health nurse will identify a contact at the local department of social services in case there is a need to verify who can authorize immunizations for the minor.
  - b. Foster parents usually know who can authorize immunizations. When in doubt, confer with the social services contact.
  - c. If immunizations are authorized by the local social services department or by the foster parent (if the foster parent has consent authority), the public health nurse will follow the steps outlined (in B) above.
4. Minor foreign exchange student: Minor foreign exchange students living with an American host family usually have a signed medical release from their parent(s) authorizing "necessary medical action." Under this situation, the host parents could sign for the required vaccine and attach a copy of the authorization form to the Vaccine(s) Administration Record.
5. Minor parents: Minor parents (i.e., unmarried minors with children) can sign for their children.
6. Divorced parent (and step parent): A divorced (or step) parent may or may not be authorized by the court to control a child's medical care. However, if the person alleges that he or she is the parent and the public health nurse has no reason to suspect the contrary, the vaccine request should not be denied. The public health nurse does not bear the "burden of proof" that the individual accompanying the minor either is or is not the parent, guardian, or legal custodian.

- E. Multiple immunizations:** When administering vaccines to a minor in a series (e.g., DTaP, Hib, or IPV), the parent/guardian/legal custodian may be given extra copies of the Vaccine Information Statement and unsigned copies of the Vaccine(s) Administration Record and instructed to sign and date each form prior to each subsequent dose. Any change in contraindications or adverse events from the previous dose of vaccine must be noted on the form. The parent/guardian/legal custodian must be instructed not to sign all copies in advance, but rather sign and date each one as close to the time of the immunization as possible. The form must be presented at the time of the clinic.

## REFERENCES (REV. 3/2021)

1. Kroger AT, Bahta L, Hunter P. General Best Practice Guidelines for Immunization. Best Practices Guidance of the Advisory Committee on Immunization Practices (ACIP). [[www.cdc.gov/vaccines/hcp/acip-recs/general-recs/downloads/general-recs.pdf](http://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/downloads/general-recs.pdf)]. Accessed on 12 March 2021.
2. Centers for Disease Control and Prevention. Epidemiology and Prevention of Vaccine-Preventable Diseases. Hamborsky J, Kroger A, Wolfe S, eds. 13<sup>th</sup> ed. Washington DC: Public Health Foundation, 2015.
3. American Academy of Pediatrics. In: Kimberlin DW, Brady MT, Jackson MA, Long SS, eds. *Red Book: 2018-2021 Report of the Committee on Infectious Diseases*. Elk Grove Village, IL: American Academy of Pediatrics; 2018.