



Instructions: Use this tracking chart to document which activities you choose to complete, and to monitor your status throughout the campaign. Complete the last three columns of the chart as you select and complete activities. The first four activities (#1-4) are mandatory and must be completed to participate in the program. You may only complete each activity one time. A single activity will not receive points for more than one category. For example, providing immunization information to parents/grandparents (Activity 19) cannot be counted again for participation in an immunization awareness event (Activity 10).

Your final award level will be determined by two factors: <u>immunization record audit score</u> for your facility and <u>total number of points awarded for the completed activities</u> below. Complete any combination of activities to reach the award level you want to reach: **Gold, Silver,** or **Bronze**!

EXAMPLES:

Scenario 1:

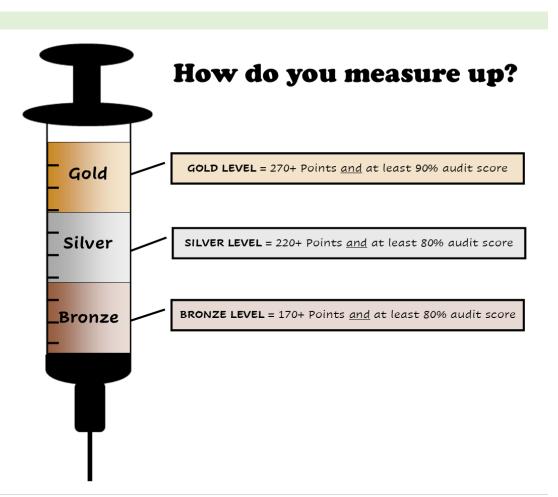
Immunization Audit Score	91%
Points from Completed Activities	270
Award Level	GOLD

Scenario 2:

Immunization Audit Score	85%
Points from Completed Activities	220
Award Level	SILVER

Scenario 3:

Immunization Audit Score	92%
Points from Completed Activities	170
Award Level	BRONZE







Activity Number	Activity Description	Additional Details	Documents Needed	Point Value	Activity Selected (y/n)	Date Activity Completed	Submitted (y/n)
1	MANDATORY – Ensure that all children have immunization records and/or applicable exemptions on file.	All immunization records and/or exemptions will be reviewed by local health department during your annual immunization audit.	No additional documentation needed	2.5			
2	MANDATORY - Submit the Annual Immunization Status Report (ASR) for the respective academic year.	To be reviewed by the New Jersey Department of Health.	Submit ASR electronically	2.5			
3	MANDATORY – Submit the pre-program survey	Link to be circulated to all participating facilities once enrolled.	No additional documentation needed	2.5			
4	MANDATORY – Submit the post-program survey	Link to be circulated to all participating facilities once enrolled.	No additional documentation needed	2.5			
5	Ensure director or designee attends an annual immunization workshop/conference to identify reporting and documentation requirements.	Facilities must participate in an immunization education training sponsored by the State VPDP and/or local health department during the school year (including the summer preceding) or access the pre-recorded webinar at recording/8675589156521993996	Sign-in sheet or certificate is needed only if the training is not done by the VPDP.	50			
6	Confirm facility has a 100% compliance rate at the <u>initial audit</u> conducted by their local health department.	Facilities must have no vaccine deficiencies during their initial immunization audit. All students must have received all required immunizations or are in the process of receiving immunizations as rapidly as medically feasible (provisional admission) or have valid medical or religious exemptions on file.	No additional documentation needed	50			
7	Complete the immunization record transcription activity.	The scenario and form to complete this activity are available in Appendix A of the welcome packet. Once completed, email or fax the completed form to Jenish.Sudhakaran@doh.nj.gov. You will then receive a link to view the pre-recorded webinar to review each step in correctly transcribing. Both components must be completed, no partial credit will be given. NOTE: Pre-recorded webinar will be available for viewing in March 2024. This link will be emailed	Email/fax completed yellow card View the pre- recorded webinar	50			





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		out to anyone who completes the 1 st part of the activity.					
8	Confirm all children received flu vaccine by the due date of Dec. 31st or have documented exemption.	Facilities must document flu requirement information by completing the flu section of the Annual Immunization Status Report (ASR). Consider using the flu vaccine tracking form in the NJ immunization requirements resources section of the welcome packet.	Must complete influenza survey section of ASR	25			
9	Ensure facility has a vaccination policy for all child care/preschool staff, with a minimum requirement for influenza (flu) and/or tetanus, diphtheria and acellular pertussis (Tdap) vaccines.	Facilities should have documented guidance/policy on staff immunization requirements and/or applicable exemptions. A sample policy and related documents are provided in Appendix B of the welcome packet.	Submit a copy of the policy	25			
10	Participate in national immunization public health observances.	Facilities should do an activity which involves immunization awareness during a national public health observance. Observances include but are not limited to: •National Infant Immunization Week (April) •National Influenza Vaccine Week (December) NOTE: Activities conducted during the month of the public health observance will qualify.	Complete and submit an Event/Activity Form	25			
11	Participate in the New Jersey Immunization Information System (NJIIS), the Statewide Immunization Registry.	If not a current user, register to participate in the school nurse training webinar. You do not need to be a school nurse to participate. For more information, contact the NJIIS School Nurse Training Coordinator: njiis.nj.gov/core/web/index.html#/training	Current and new users must provide your NJIIS user name on this form.	25		Provide Username:	
12	View the Hot Shots for Tots campaign kick-off webinar.	The webinar will be held on January 16, 2024 . Facilities must view either the live webinar, or the recording of the kick-off webinar. The webinar will review various components of the campaign.	No additional documentation needed	25			





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13	Incorporate a vaccine preventable disease information into lesson plan and/or classroom activity.	Lesson plan can include topics such as: • handwashing, • how to reduce spread of germs, • preventing colds and flu, etc. • invite a local health care provider to provide a presentation about the importance of vaccinations and/or personal hygiene such as handwashing Refer to the classroom activities resources section of the welcome packet for sample lesson plan and activities.	Complete and submit an Event/Activity Form	10			
14	Maintain antigen-specific exemption list for all children in the facility.	Facilities should provide information about how students with exemptions are tracked. A template exemption list is provided in Appendix C of the welcome packet. If a form is used, you must provide a blank sample copy of the form.	Complete and submit an Event/Activity Form	10			
15	Recognize and promote positive immunization behaviors.	An example of this activity may be to send appreciation cards/letters to parents/guardians who have up-to-date immunization records on file for their children. A sample thank you card is provided in Appendix D of the welcome packet.	Complete and submit an Event/Activity Form	10			
16	Complete an immunization- themed quiz. A link to the quiz will be shared with facilities when available.	Facilities should designate one person to take the quiz. A score of at least 80% must be reached to receive credit for the activity. You may retake the quiz if you do not get to 80% on the first attempt.	Submit quiz online	10			
17	Post educational materials on immunization/communicable disease-related topics (e.g. flu vaccine requirement, handwashing) in facility.	Facilities should display immunization materials at pick-up and drop-off areas.	Complete and submit an Event/Activity Form	10			
18	Provide information to parents about childhood immunizations.	Facilities should provide information to parents/guardians on New Jersey's immunization requirements for child care/preschool. <i>Refer to the Welcome Packet for resources</i> . Documents can be sent electronically and can include but not limited to the following: • Child care/preschool immunization chart • Locations to access free or low-cost vaccine (<i>See Appendix E for locations in your county</i>)	Complete and submit an Event/Activity Form	10			





Activity Number	Activity Description	Additional Details	Documents Needed	Point Value	Activity Selected (y/n)	Date Activity Completed	Submitted (y/n)
		Local immunization clinic schedules					
19	Distribute immunization information to family members,	Facilities should provide information about the importance of adult immunizations. Refer to the adult immunization resources section of the welcome packet for sample materials.	Complete and submit an Event/Activity Form	10			
20	Confirm if facility has a mechanism for tracking required childhood immunizations for provisional students.	Facilities should provide information about how students with provisional status are tracked. If a form is used, you must provide a blank sample copy of the form.	Complete and submit an Event/Activity Form	10			
21	Distribute and/or post COVID-19 vaccine information for family members	Facilities should provide information about the importance of COVID-19 immunizations. Refer to the COVID-19 resources section of the welcome packet for sample materials.	Complete and submit an Event/Activity Form	10			
22	Incorporate COVID-19 disease prevention methods into lesson plan and/or classroom activity.	Lesson plan may include:	Complete and submit an Event/Activity Form	10			

TOTAL POINTS Signature