NJHealth
New Jersey Department of Health

Immunization Auditing Guidelines

Reference Manual for Local Health Departments (LHD)

Immunization Auditing Guidelines

I. Introduction and Regulatory Overview

Pursuant to the Public Health Practice Standards of Performance for Local Boards of Health in New Jersey (N.J.A.C. 8:52), Local Health Departments (LHDs) are required to conduct annual immunization audits for schools and child care centers. These audits ensure strict compliance with N.J.A.C. 8:57-4, the New Jersey State Sanitary Code, governing the immunization of children in child care settings and schools.

Conducting comprehensive annual audits is a public health best practice. These audits provide accurate, timely, and actionable local data that help to assess population immunity and identify pockets of vulnerability before potential infectious disease outbreaks occur. Maintaining high immunization coverage through annual audits supports compliance with immunization regulations and helps keep children and their broader communities healthy and safe.

NOTE: Child care centers and schools encompass early childhood/preschool programs.

II. LHD Audit Report

The LHD report collects the immunization status of students attending child care and schools. The audit includes the collection of antigen-specific immunization and exemption data based on grade level. The form includes the collection of the following fields:

- Audit/Reaudit Date
- Number of Children Enrolled in Grade/Number of Children Subject to Reporting
  - Child Care Preschool
  - Kindergarten or 1st Grade (entry level grade in school)
  - 7th Grade
  - Transfer Students (Any grade from 2-6 or 8-12)
- Total Children Meeting All Immunization Requirements
- Total Children with Provisional Status
- Total Children with Exemption (Medical or Religious)
  - Total Children with Religious Exemptions
  - Total Children with Medical Exemptions
- Total Children who are Out of Compliance

II. Access to LHD Audit Report

Starting in the 2026-27 academic year, the LHD Immunization Audit form will only be accessible through the New Jersey Immunization Information System (NJIIS). All LHDs must be enrolled in NJIIS to ensure access to the new LHD Audit Report under School Forms. Additional information is available in the NJIIS Auditing FAQs at njiis.nj.gov/SchoolReportFAQs.pdf.

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III. Trainings and Resources

- **Annual Immunization Status Report Training:** Provides an overview of how to fill out and complete the Annual Immunization Status Report. register.gotowebinar.com/register/1147500267204169557

- **LHD On-Demand Immunization Audit Training:** Provides an overview of how to fill out and complete the immunization audit report. gotowebinar.com/register/1147500267204169557

- **Child Care/Preschool Vaccination Requirements Chart:** Outlines the immunization requirements that must be met for attendance in child care centers and preschool programs. nj.gov/health/cd/documents/imm_requirements/cc_preschool_requirements_parents.pdf

- **K-12 Vaccination Requirements Chart:** Outlines the immunization requirements that must be met for attendance from kindergarten through 12th grade. nj.gov/health/cd/documents/imm_requirements/k12_parents.pdf

- **Immunization Manual for Child Care Centers and Schools:** nj.gov/health/cd/documents/imm_requirements/immunization-manual.pdf

- **Compliance Calculator:** njiis.nj.gov/docs/schoolForms/ComplianceRateCalculator.xlsx

V. Auditing Methodology

LHD personnel must conduct a 100% immunization record review for the following target populations within their designated jurisdiction:

- Childcare & Preschool Facilities: All children who are over 2 months of age.
- Kindergarten: All children in Kindergarten
- Grade 1 (Entry Level): All children in Grade 1 if it's the facility's primary entry-level point. If Kindergarten is the entry grade, audit only new entrants into Grade 1.
- Grade 7: All children in Grade 7. If a student's immunization record was previously audited at the time of kindergarten entry, the Grade 7 audit should focus solely on confirming that the adolescent booster doses required for 7th grade have been administered.
- Transfer Students: All children newly transferring from out-of-state or out-of-country in any grade that is not being captured in the report (Grades 2-6 and 8-12) since the previous audit cycle. Transfer students in Childcare/Pre-K, Kindergarten, 1st Grade, and 7th Grade should be entered strictly within their corresponding grade rows rather than generic transfer categories.
  - Out-of-district transfers will no longer be captured on the audit report.

NOTE: Routine full-grade auditing of high schools is currently optional and not mandated by the NJDOH unless specific local risk factors prompt direction. However, as a best practice, LHDs should review records for high school transfer students arriving out-of-state or out-of-country.

IV. Acceptable Immunization Records for Auditing

Under N.J.A.C. 8:57-4.6, immunization documentation must be maintained in a discrete, organized file, and multiple forms of official records are acceptable. Schools and child care centers are not limited to a single "official immunization card." Acceptable proof of immunization includes:

- Approved Forms of Immunization Documentation:
  - Official facility records, including electronic health records.
  - Government-issued immunization records from any U.S. health authority.
  - Records signed by authorized vaccinators, including:
  - Healthcare professionals
  - Pharmacists
  - Any New Jersey–licensed professional authorized to order/administer vaccines
  - Equivalent licensed professionals from other jurisdictions (English translation required if applicable)
  - Official NJIIS records, including records accessed through the Docket® mobile or web application.
  - Official New Jersey School Immunization Record.
  - Government-issued immunization records from other countries, with translation, if needed.

The Department's best practice is for child care and schools to transcribe the immunization information onto ANY document or an electronic equivalent record that allows for the ease of review of the complete immunization history. However, it is not a requirement. Those reviewing the individual immunization history for completeness would have to utilize the documents provided in the discreet file by the childcare center or the school.

VI. Regulatory Definitions and Glossary

Provisional Admission: Students who are not fully meeting all requirements but have documented receipt of at least one dose of each age-appropriate required antigen and are no later than 14 days behind in receiving the remaining doses in accordance with the American Academy of Pediatrics (AAP) Catch-up Schedule.

Out of Compliance: Students currently on the active roster who lack documented compliance for mandatory immunizations, do not meet the criteria for provisional admission, and do not possess an active medical or religious exemption on file. This includes excluded students or those missing vaccinations, while a space is saved.

Varicella History: Parental history of previous varicella disease is no longer acceptable. A valid, documented physician diagnosis or serological confirmation of prior chickenpox disease is acceptable. This meets requirements and is not reported as a medical exemption or out of compliance.

30-Day Grace Period: Applicable exclusively to students entering a New Jersey school from out of the country. They are granted up to 30 days to produce official immunization histories. For formal reporting purposes during an audit, they are marked as Out of Compliance until records are delivered, though they should not be physically excluded.

4-Day Grace Period: Allows vaccines administered 4 days or less before the absolute specified minimum age or spacing interval to be counted as valid for enrollment or continued attendance.

VII. Compliance Rate Calculation

A. Official School Compliance Rate

This version of the audit report does not automatically generate the compliance rate. Until the calculation feature is added in a future update, LHDs must calculate the rate manually using the full facility roster, including excluded or non-attending out-of-compliance students. Use the formula below or the Compliance Calculator Tool (see Training and Resources).

Compliance Rate % = [(Students Enrolled - Students Out-of-Compliance- Students with Exemptions- Students with Provisional Status) / Students Enrolled] x 100

Students Enrolled: The total number of children in the grade who are reported on the survey. This count should exclude any students who were removed from attendance because they did not meet school entry requirements.

Students Out-of-Compliance: The number of children who are excluded from attending or who do not meet the criteria for any other category. This includes children who are missing a required vaccination or who lack documentation of vaccination (i.e., children with an unknown vaccination status).

Students with Exemptions: The number of children who have valid medical or religious exemptions.

Students with Provisional Status: The number of students who have a minimum of one dose of all of the required age-appropriate vaccines and are no later than 14 days behind in receiving the remaining doses per the AAP Catch-Up Schedule.

Statutory Thresholds: Schools must maintain a baseline compliance rate of ≥ 90%, whereas childcare and preschool facilities must maintain a rate of ≥ 95%. Falling below the threshold triggers a mandatory re-audit.

VIII. Reporting Scenarios and Data Management Protocols

LHD personnel must handle specialized reporting scenarios during audit report entry according to the standardized matrix below:

Scenario Category	Context Description	Mandated Reporting Action
Initially Out of Compliance	The student is found to be out of compliance at the initial audit and has no exemption or provisional paperwork on file.	Mark student as Out of Compliance.

Scenario Category	Context Description	Mandated Reporting Action
Filed Exemption	Student is out of compliance at initial audit, but submits a valid medical/religious exemption prior to re-audit.	Mark student as out of compliance for the initial audit, and mark as 'Exempt' (Medical/Religious) during the re-audit.
Out of Compliance - No Longer Enrolled	Student is out of compliance at initial audit but leaves the school roster entirely (no spot saved) prior to the re-audit date.	Remove the student from the initial audit data. Subtract 1 from the total surveyed, total out of compliance, applicable antigens, and exclusions. Do not include them in the re-audit.
Compliant - No longer enrolled	Student is compliant during initial audit but is no longer enrolled during the re-audit phase.	Maintain the student in the initial audit data as compliant. Compliant students are never subjected to re-audit tracking.
Excluded at Initial Audit	Student is out of compliance and actively excluded during the initial audit.	Mark student as out of compliance and add them to the Total Pupils Excluded Column.
Active Provisional Status	Student is provisional at audit and is due for a vaccine before the re-audit window.	Student is not out of compliance. They are provisional at the initial audit and should not be re-audited.
Active 30-day Grace Period	The student is within the 30-day out-of-country transfer grace period and has not yet submitted records.	Mark student as out of compliance on the initial audit form. If records arrive by re-audit, mark them as meeting all requirements. If no re-audit is required due to high facility compliance, they remain marked out of compliance for that report.
Documentation filed during 30-day Grace Period	Student has transferred within the past 30 days but provides immunization records at the time of audit.	Once documentation is provided, the grace period ends. Add this student to the appropriate category based on the records.

Scenario Category	Context Description	Mandated Reporting Action
Mid-Cycle Transfer	A student transfers into the facility in the interim period between the initial audit and the scheduled re-audit.	Do not include this new student in either the initial audit dataset or the re-audit dataset. Track and follow up with them independently.
Flu- Aged Into Requirement	If an infant is under 6 months old at the initial audit (exempt from flu rules) but turns 6 months old by the re-audit date.	Do not mark them out of compliance at either point. This keeps denominator tracking consistent.
Flu- Post-Season Re-Audits	If a mandatory facility re-audit takes place on or after April 1st (after the flu mandate period expires).	Do not mark students as out of compliance for influenza in the re-audit data, regardless of past status or age.
Varicella Disease History	Student has history of varicella disease with documented doctor's diagnosis or laboratory evidence of immunity.	Student meets immunization requirements for varicella. This is not considered a medical exemption or out of compliance. Include this student in the Varicella Disease History section.

Note the Following:

- Only re-audit students who are truly out of compliance; provisional and exempt students are not considered out of compliance.
- Students in the 30-day grace period who have not provided immunization records must be reported as out of compliance, but they should not be excluded from school. The grace period ends once complete documentation is submitted.
- Students who were out of compliance and excluded during the initial audit should still be marked as out of compliance. The compliance rate reflects student compliance with documentation requirements, not the school's compliance with New Jersey immunization requirements.

IX. Influenza Auditing Workflows for Child Care/Preschool

The annual influenza immunization requirement now applies to children aged 6 months of age and older (with no upper age limit) enrolled in child care and preschool facilities. The deadline to receive the flu vaccine is November 30.

LHDs must follow specific logic (See Protocols below) based on the timing of the audit to ensure that data denominators remain consistent.

Protocol A: Standard Audit

LHDs can conduct immunization record audits between September 1 – June 30 of each academic year for the following:

- Childcare/Preschool: Audit students for all vaccine requirements, including flu (See Flu Vaccine Protocol B for further guidance).
- K-12: Audit students for all vaccine requirements (excluding flu vaccine)

Protocol B: Flu Vaccine Audit

Auditing childcare/preschool facilities before November 30th is not recommended. If scheduling forces an audit before this date, the LHD must utilize this two-step framework:

- **Step 1 (Pre-November 30 'Early Audit'):** Perform the initial on-site review for all non-influenza antigens. Record students who have already received the influenza vaccine or have exemptions on file, and list upcoming provisional due dates. No students are marked out of compliance for flu at this stage.
- **Step 2 (post-November 30 deadline):** Return to the facility on a designated 'Audit Day' on or after December 1st. Review new enrollments, remove students who have disenrolled, and audit the influenza status of all remaining eligible pupils. Submit this updated information on the NJIIS LHD Audit form.

NOTE: Facilities permitting non-compliant children to attend after the flu vaccine deadline are in violation of New Jersey Administrative Code and are subject to statutory penalties (N.J.S.A. 26:1A-10).

X. Auditing Timeline and Best Practices

A. Administrative Requirements

- **Audit Timeline:** September 1-June 30
- **Submission Deadline:** All official immunization audits must be submitted electronically via the NJIIS online portal no later than June 30 of the respective academic year.
- **The 30-Day Resolution Window:** If an initial audit reveals compliance levels below the compliance thresholds (<90% schools, <95% childcare), formal follow-up or a physical re-audit must be completed within 30 days. LHDs should issue a standardized enforcement letter requiring resolution within this window.

B. Auditing Best Practices

- Verify that the facility maintains an official State of New Jersey Immunization Record for every single student on the master roster (Acceptable formats: IMM-8 Yellow Card, Department of Education A-45 Form, official NJIIS Record printout, or any electronic equivalent).
- Ensure the facility maintains a distinct, easily accessible list of all medical and religious exemptions for rapid deployment during an active outbreak situation.
- Have the facility director or school nurse sign two copies of a formal Letter of Understanding detailing the exact timeline for resolving deficiencies and citing statutory non-compliance penalties. Leave one copy on-site and retain the original for LHD records.