2019 Policy Statement on Vaccine Status of Campers, Staff, Faculty, and their families attending URJ Camps and Israel programs

Vaccination has a Jewish context
Each year, the American Academy of Pediatrics and the Canadian Paediatric Society publishes a “Recommended Childhood and Adolescent Immunization Schedule.” Practicing pediatricians across North America recognize these schedules as the standard of care regarding childhood & adolescent vaccinations. Concurrently, the US Centers for Disease Control & Prevention (CDC) annually publish vaccine standards for adults.

Among our most cherished Jewish values is the imperative for preserving life and maintaining health. We embrace this value specifically by taking preventive measures to protect the public health of our camp community as a whole. This is why we require all children, staff, faculty, and their families planning to attend our URJ camps and Israel programs to adhere to the immunization standards described below.

Vaccination is a shared responsibility and is our expectation
Parents send their children to camp and assume that their children will enjoy themselves, have positive social interactions, learn from the rich Jewish environment and be safe and healthy. All the fun, friendship building, Jewish identity affirmation and character development can only happen if we are absolutely confident that individual safety and public health remain at the center of every decision made throughout the URJ camps and Israel programs. Reducing the risk of vaccine-preventable illnesses from entering any of our camps or travel programs is simply the single most effective strategy to protect public health. This goal can be accomplished only through the appropriate vaccination of all members of our camp and travel programs. Individual families may choose to defer the vaccination of their children, at the URJ we cannot and will not defer the safety of our camps and travel programs.

What we require

ALL THOSE WHO ARE IN RESIDENCE AT CAMP OR ARE TRAVELING ON A URJ PROGRAM are required to have completed the age-appropriate vaccine schedule recommended by the American Academy of Pediatrics (AAP), the Canadian Paediatric Society, and the Center for Disease Control (CDC). Please note that some of these vaccines are provided as combined doses rather than individually, such as Pediarix or ProQuad. Ask your health care provider if you are not sure which vaccines you or your child(ren) have received.

1. Children below the age of 11 will have completed all of the age appropriate number of doses of each immunization listed below, the specific number of doses depends on the age of the child. For example, a 2-year-old child will have received 4 doses of DTaP, and a child above age 6 will have received 2 doses of MMR, etc).
   - DTaP (Diptheria, Tetanus & Pertussis)
   - HiB (Heamophilus Type B)
   - IPV (Polio)
   - MMR (Measles, Mumps & Rubella)
   - PCV13 (Pneumococcus)
   - Varicella (Chicken Pox)
2. **Children between 11 and 12 years of age** will have completed **all** of their age appropriate vaccine schedule which specifically contains the doses as noted here. Again, some of these vaccines are provided as combinations, please check with your child’s health care provider to confirm that these series have been completed.

- **DTaP/DT/TDaP (Diphtheria, Pertussis, Tetanus)** – 5 doses
- **Varicella (Chicken Pox)** – 2 doses
- **MMR (Measles-Mumps-Rubella)** – 2 doses

3. **For children over age 11** (completion of the above series listed in #2, **PLUS**):

   - **Meningococcal (Menactra or Menveo)** – 1 dose, second booster dose at age 16
   - **TDaP booster (Pertussis, Tetanus)** - 1 dose between ages 11–12 (As per above)

4. **For anyone over age 18** (completion of the above series listed in #3, **PLUS**):

   - **Pertussis & Tetanus (TDaP)** – Booster doses are given every 10 years after the dose given in early adolescence, please ensure you are up to date.
   - **Pneumococcus, Meningococcus, Shingles** - Please review your eligibility for these vaccines with your health care provider.

5. **Highly recommended for everyone**

   - **Hepatitis A** – 2 doses
   - **Hepatitis B** – 3 doses
   - **Influenza** – 1 dose (2 if never previously immunized). Influenza remains a serious illness for all age groups. There have been recent seasonal influenza patterns that have extended into the summer. Since we do not yet know the probability this year if influenza will extend into the summer months, we **VERY STRONGLY RECOMMEND** that all campers and staff receive the **flu vaccine** this year.

**What about catch-up vaccination schedules?**

For campers undergoing catch-up vaccination, the doses noted above may not be indicated or sufficient. Please discuss specific immunization catch-up strategies with your child’s health-care provider.

**What about Gardasil HPV (Human Papillomavirus) vaccine?**

This vaccination provides long-lasting protection from cancers caused by HPV with two doses between ages 11-12 and is strongly endorsed by the American Cancer Society as a primary cancer prevention strategy. While this is not a vaccine that prevents the spread of an illness that directly affects the health of our camps and travel programs, it is a safe and effective vaccine that significantly decreases the risk of a very serious and life-threatening cancer. For this reason, we strongly endorse and recommend completion of this component of the childhood vaccination schedule. For more information, please refer to the CDC website “6 Reasons To Get HPV Vaccine For Your Child”:

[www.cdc.gov/hpv/infographics/vacc-six-reasons.html](http://www.cdc.gov/hpv/infographics/vacc-six-reasons.html)

**Yes, there are exceptions to the URJ vaccination policy, and they are very, very rare**

We recognize that individuals who have had a documented allergy or severe adverse reaction to a particular vaccine may not be able to complete the immunization schedule outlined above. Additionally, individuals with medical conditions such as congenital immunodeficiency or HIV, cancer and who are receiving chemotherapy,
transplant patients, and persons receiving immunosuppressive drugs and chronic steroids also may not be able to receive certain vaccines. **In these extremely rare circumstances, current documentation from a Physician (MD or DO), or a Pediatric/Family Practice Advanced Practice Nurse (ARNP or PNP), describing the reason for exemption from immunization must be furnished to URJ Camps or Israel Program.** We are happy to discuss case by case management of the extremely rare circumstance of medical contraindication to partial or complete vaccination.

**Thank you!**
The vaccination of all members of our community is essential in order to maintain a safe camp and travel environment for your child. We thank you for your timely attention to these requirements.