



Measles protection law

> For those employed in Community Facilities

Masernschutzgesetz – Merkblatt für Beschäftigte in Gemeinschaftseinrichtungen – englisch

Frequently asked questions about the measles protection law

1. Why is there a law on protection from measles?

Measles is one of the most contagious infectious diseases in man. Particularly in children under the age of 5 years and in adults, measles can lead to serious complications. These include middle ear infections, lung infections and diarrhea, and more rarely even encephalitis, and there can be late sequelae. In total, around 1 to 3 in 1,000 people who contract measles die from it in industrialised countries. There have also been deaths from measles in Germany in recent years. The measures taken to date to increase the rate of measles vaccination have not resulted in enough people in Germany being vaccinated. There are still vaccination gaps, so that each year several hundred to a few thousand people in Germany fall ill with measles. It is possible to eliminate measles if 95% of the population are protected from measles. The purpose of the law is to increase the vaccine protection in those places where measles transmission can occur very rapidly if insufficient individuals are immune to measles, and above all to protect individuals there who cannot themselves be vaccinated against measles, e.g. because they are still too young to be vaccinated (children <9 months old), pregnant women or individuals who have a very weak immune system.

2. Who does the measles protection law apply to?

The law applies to everyone born after 1970 who is at least one year old and who

1. is cared for in one of the following community facilities: day care centres and nurseries, certain types of children's day care, school and other educational facilities in which predominantly underage people are cared for.

2. have already been 4 weeks

- a) in the care of a children's home
- b) resident in shared accommodation for asylum seekers and refugees or late emigrants.

3. who work in health facilities such as hospitals and medical practices or in communal facilities or collective living quarters (facilities as in 1 and 2).

Individuals who cannot be vaccinated due to a medical contraindication and who present appropriate evidence are exempt from these regulations.

3. In which cases does the law also apply to day care?

Day care is subject to the new regulations when it is so-called permit-requiring day care. This includes day care workers who, for part of the day, look after one or more children outside the household of those with parental authority, and who do so for more than 15 hours per week over a period of more than three months for financial reward. All individuals who are cared for or work in such facilities must demonstrate that they have been vaccinated.

4. Does the law also apply volunteers and trainees?

Yes, both volunteers and trainees are also subject to the measles protection law when they are regularly (not just for a few days) and not just briefly (not just for a few minutes at a time, but rather for extended periods) active in the facility.

5. From when does the law apply?

The law applies from 1st March 2020. All individuals who are already looked after or active in a corresponding facility must provide evidence by 31st July 2021.

6. What precisely needs to be proved?

Individuals to whom the law applies and who are at least one year old must prove either a measles vaccination or confirmed immunity to measles. Individuals born after 1970 and at least 2 years old must demonstrate two measles vaccinations or a doctor's confirmatory note of adequate immunity to measles. Immunity can be determined by a blood test (so-called titre determination). The costs of medical confirmation generally fall to the individual.

The legal provisions align with the recommendations of the Standing Committee on Immunisation (STIKO). If the immunisation status is unclear, the vaccinations should be repeated. An antibody assessment (titre determination) is not recommended by the STIKO.

If there is a medical contraindication, then this needs to be confirmed by a medical report.

7. Will protection against measles be tested?

Affected individuals must, prior to entering care or starting employment, provide the following evidence to the management of their facility:

1. a vaccination passport or a medical report confirming measles immunisation.
2. a medical report confirming immunity to measles or that vaccination is impossible due to a medical contraindication
3. confirmation from a public agency or the management of another facility that evidence as laid out in 1 or 2 has already been provided.

The highest County Health Authority, or an authority appointed by it, can determine that the evidence should not be submitted to the management of the facility but rather to the Health Authority or another public agency. The authority responsible for issuing permits for day care work can determine that, prior to starting work, the evidence should also be submitted to them.

8. What happens if employees do not submit evidence?

Anybody who does not submit evidence may not be employed in the above-named facilities. If this is the case, the Health Authority does not need to be informed.

Individuals who are already employed in such facilities when the act comes into force must provide evidence by 31st July 2021. If this is not done, or if it is only possible later, then the management must inform the Health Authority. Regulation for school-age individuals: if the evidence is not provided, or it transpires that it can only be provided at a later date, then the management of the particular facility or the state-ap-

pointed agency must inform the local Health Authority of the fact, insofar as individuals are involved who may nevertheless be admitted to the facility (school-aged).

9. What happens after the Health Authority has been notified?

If the required evidence has not been submitted within a certain time period (at least ten days and perhaps up to three months in order to permit the measles vaccination to be completed), the Health Authority may invite the obligated individual to a consultation.

Independent of this, in individual cases the Health Authority can decide whether, after a suitable period has elapsed, to impose work or access restrictions (other than for school-age individuals as well as in cases of vaccine supply bottlenecks) or whether fines and penalties should be imposed.

10. What service regulatory and employment law consequences are possible?

The Health Authority can impose an employment ban on an individual worker. The consequences for the supervisory, service or employment contracts depend upon the particular contract, service or employment laws. An appropriate vaccination against measles in the above-named institutions is provided for in law and provides a framework for the possible individual consequences.

11. Will fines be imposed?

It is left to the discretion of the responsible authorities whether they impose a fine. The management of a facility which, contrary to legal prohibitions, cares for or employs a person, or in the case of an obligation to notify the Health Authority fails to do so, must reckon with a fine of up to 2,500 Euros.

This also goes for persons who, despite requests from the Health Authority, do not provide evidence within a reasonable time frame. A fine can generally only be imposed once.

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