



RIVER VALLEY SCHOOL DISTRICT

660 West Daley Street

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Spring Green, Wisconsin 53588

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Phone: 608-588-2551

523-Rule

Guidelines and Procedures Regarding Communicable Disease

I. Communicable Disease

Communicable diseases are defined as those diseases that are transmittable and may jeopardize the health and safety of both students and staff.

For the purposes of these guidelines, communicable diseases include, but are not limited to, the following:

AIDS (HIV Human Immunodeficiency Virus)	Mumps
Amebiasis	Pediculosis
Campylobacter	Pertussis
Chicken Pox	Reye Syndrome
Chlamydia	Rheumatic Fever
Conjunctivitis	Ring Worm
Cytomegalovirus	Rubella
Encephalitis	Salmonella
Giardiasis	Scabies
Gonorrhea	Shigellosis
Hepatitis	Staphylococcus
Impetigo	Streptococcus
Kawasaki Syndrome	Strep Throat
Lyme Disease	Scarlet Fever
Measles	Syphilis
Meningitis	Tuberculosis
Mononucleosis	

Educational and Preventive Measures

- A. The district will ensure that all students have their required immunizations.
- B. The School Nurse shall be responsible for the appropriate maintenance of a health station in each school building. A communicable disease wall chart will be posted at each health station. Persons designated to assist students with illnesses shall be given information regarding the suppression and control of communicable diseases.
- C. Information regarding suppression and control of communicable diseases will be included in the regular health curriculum for students and provided to all staff through inservice at regular intervals.

- D. First Aid kits and other supplies and equipment appropriate to reducing the risk of transmission of communicable diseases in the school environment will be provided in each school building.

Reporting And Confidentiality

- A. The principal shall function as the district's liaison with students and staff, parents and physicians, public health officials and the community at large concerning communicable disease issues in the school.
- B. School personnel will report any suspicion of a communicable disease to the School Nurse who is responsible to make an assessment and report the communicable disease to Sauk County Public Health Department, if required.
- C. Records and information (both oral and written) on students and staff with suspected or confirmed communicable disease are confidential and will be handled in accordance with Wisconsin Statutes on pupil records. Such knowledge is confined only to those persons with a direct need to know for the purposes of investigation, control, and prevention of the disease.
- D. On a regular basis the school board shall:
 - 1. Review its general infection control policy and adapt it to reflect changes in current public health information and Wisconsin Statutes.
 - 2. Educate school personnel and students regarding practices to reduce the spread of communicable disease.

II. Exclusion from School for Health Reasons

- A. A student or staff person may be excluded from school for health reasons if he/she:
 - 1. Has a condition that requires immediate medical diagnosis or intervention, (e.g., needs diagnosis of a rash, fever of unknown etiology, sutures, emergency dental care, etc.)
 - 2. Has a condition that requires ongoing supervision that cannot be provided in the school setting. (e.g., needs continuous observation after a concussive blow or seizure).
 - 3. Is not able to function in school because of illness, e.g., fever, vomiting, diarrhea.
 - 4. Has untreated pediculosis (lice), scabies.
 - 5. Poses a significant health risk to others in the normal course of his or her school day activities.

Such a significant health risk is posed when:

- a. Any student and/or staff is in the infectious state of a serious airborne transmitted communicable disease. Serious airborne transmitted diseases include, but are not limited to, chicken pox, measles, mumps, pertussis, tuberculosis, and rubella.
- b. Students and/or staff are unable to hygienically manage their bowel and bladder functions and they are in the infectious stage of an oral-fecal transmitted communicable disease. Oral-fecal

transmitted diseases include, but are not limited to, Hepatitis-A, gastrointestinal infections such as giardiasis, salmonella, shigella, and parasites such as pinworms.

- c. Students and/or staff have a disease which may be transmitted by body fluids, and have open lesions and whose developmental level or behavioral pattern makes it difficult for them to refrain either from touching the lesion and therefore, spreading the underlying infection or from biting, e.g., (very young or developmentally delayed students with impetigo, Hepatitis B virus, HIV (AIDS), staphylococcus aureus, Beta Hemolytic streptococcus or conjunctivitis infection.)
- B. A student and/or staff may not be excluded from school when the risk of transmission of a communicable disease is nonexistent in the school setting because transmission can only occur through sexual or intimate contact (e.g., gonorrhea, genital herpes, trichomonas, vaginitis, HIV (AIDS), cytomegalovirus or chlamydia) or when it can be controlled through education of the child and staff and the provision of readily available supplies to carry out hygiene measures (e.g., covering open lesions or cuts of those infected with a bloodborne transmitted communicable disease and training in safety procedures for staff who clean up spilled body fluids.)
- C. Parents are notified of students suspected of having a communicable disease that may be transmitted to others in the school setting. Notification may be done by the principal, nurse, or other designated personnel. Such pupils and/or staff will be isolated and sent home for purposes of diagnosis and/or treatment.
- D. Students and/or staff who have contracted a communicable disease which may be transmitted in the school setting will not be readmitted until such time as it can be determined that the risk of transmission has subsided.
- E. Readmission may require a physician's signed statement that examination and treatment was obtained concerning the individual's suitability to return to school.
- F. Alternative education opportunities will be arranged for students who must be isolated from school for a significant period of time.

III. Handling of Body Fluids

- A. Employees and students may knowingly and unknowingly be harboring transmissible diseases in their body fluids (such as HIV and Hepatitis-B virus). Therefore, **ALL BODY FLUIDS ENCOUNTERED ARE TO BE CONSIDERED CONTAMINATED AND INFECTIOUS!**
- B. The term "body fluids" includes: drainage from scrapes, cuts and open lesions, semen, blood, feces, urine, vomitus, respiratory secretions, (e.g., nasal discharge) and saliva.
- C. The following recommendations shall be implemented by all school employees:

What Should be Done to Avoid Contact With Body Fluids?

When possible, direct skin contact with body fluids should be avoided. Disposable gloves will be available in the office of the custodian, nurse, or principal. It is recommended that each staff member keep a pair of gloves in their classroom or immediate work environment. Gloves are recommended when an individual has direct hand contact with body fluids (for example, treating bloody noses, handling clothes soiled by

incontinence, cleaning small spills by hand). Gloves used for this purpose should be put in a plastic bag or lined trash can, secured and disposed of daily. **DO NOT REUSE GLOVES!** Wash hands after removing gloves.

What Should be Done if Direct Skin Contact Occurs?

In many instances, unanticipated skin contact with body fluids may occur in situations where gloves may be immediately unavailable (for example, when wiping a runny nose, applying pressure to a bleeding injury, helping a child in the bathroom). In these instances, hands and other affected skin areas of all exposed persons should be routinely washed with soap and water after direct contact has ceased. Clothing and other nondisposable items (for example, towels used to wipe up body fluids) that are soaked through with body fluids should be rinsed and placed in plastic bags. If presoaking is required to remove stains, use gloves to rinse or soak the item in cold water prior to bagging. Clothing should be sent home for washing with appropriate directions to parents. Contaminated disposable items (for example, tissues, paper towels, diapers) should be handled with disposable gloves.

How Should Spilled Body Fluids be Removed from the Environment?

To remove body fluids, a sanitary absorbent agent is applied, then vacuumed or swept up after a few minutes. The vacuum bag or sweepings should be disposed of in a plastic bag. The broom and dustpan should be rinsed in a disinfectant. No special handling is required for vacuuming equipment.

After removing the body fluid spill, a 1:10 bleach should be used to disinfect hard surfaces or equipment. Mops and other non-disposable equipment should be soaked in the disinfectant solution after use and rinsed or washed in a hot water cycle and rinsed. Disposable cleaning equipment and water should be placed in a toilet or plastic bag as appropriate. The disinfectant solution should be promptly disposed of down a drain.

To disinfect rugs, apply sanitary absorbent agent, let dry and vacuum. If necessary, mechanically remove with dustpan and broom, then apply rug shampoo (a germicidal detergent) with a brush and re-vacuum. Rinse dustpan and broom in disinfectant. Wash brush with soap and water. Dispose of nonreusable cleaning equipment as noted above.

Removal of Gloves and Handwashing

Remove gloves carefully, holding them at the cuff and pulling toward the fingers, removing the glove with its outside surface in (inside out). Proper handwashing requires the use of soap and water and vigorous washing under a stream of warm running water for about ten seconds. Soap suspends easily removable soil and microorganisms, allowing them to be washed off. Rinse under running water. Use paper towels to thoroughly dry hands.

Laundry Instructions for Clothing Soiled with Body Fluids

The most important factor in laundering clothing contaminated in the school setting is eliminating potentially infectious agents with soap and water. Adding bleach will further reduce the number of potentially infectious agents. Clothing soaked with body fluids should be washed separately from other items.

Transmission Concerns in the School Setting

Body Fluid Source of Infectious Agents

<u>Body Fluid Source</u>	<u>Organism of Concern</u>	<u>Transmission Concern</u>
Blood -cuts/abrasions -nosebleeds -menses -contaminated needle	Hepatitis B virus HTLV-III virus Cytomegalovirus	Blood stream inoculation through cuts and abrasions on hands Direct blood stream inoculation
Open Lesions	Staphylococcus aureus Beta hemolytic Streptococcus Hepatitis B virus	Contact with drainage from open lesion
Feces* -incontinence	Salmonella Shigella Rotavirus Hepatitis A virus	Oral inoculation from contaminated hands
Urine -incontinence	Cytomegalovirus HTLV-III virus	Bloodstream and oral (?) inoculation from contaminated hands
Respiratory Secretions -saliva -nasal discharge	Mononucleosis virus Common cold virus Influenza virus HTLV-III virus Hepatitis B virus	Oral inoculation from contaminated hands Bloodstream inoculation through cuts and abrasions on hands/bites
Vomitus*	Gastrointestinal viruses (for example, Norwalk agent, Rotavirus)	Oral inoculation from contaminated hands
Semen	Hepatitis B virus HTLV-III virus Gonorrhea	Sexual contact (intercourse)

* Possible transmission of HTLV-III infections and hepatitis B is of little concern from these sources. No evidence exists at this time to suggest that the HTLV-III virus is present in these fluids.

IV. Handling of Persons Infected with HIV

- A. Each person reported to have reliable diagnosed Human Immunodeficiency Virus (HIV or AIDS) shall be carefully and thoroughly evaluated for placement on an individual case by case basis.
- B. With the permission of the infected individual (if an employee) or parent/legal guardian (if a student), placement evaluation shall be made by a "health assessment team" consisting of the infected individual or parent/legal guardian, the individual's physician, a physician knowledgeable about HIV infections, a local public health representative, school Nurse and principal.
- C. The health team will formulate a recommendation as to the most appropriate placement of the individual and assure that placement recommendations are implemented.

D. The placement recommendations shall be based on the following:

1. The most current medical knowledge available.
 - a. Based on current evidence, casual person to person contact as would occur among school children appears to pose no risk for HIV transmission. Therefore, as a general rule, children (or staff with HIV infection should be allowed to attend school in their regular classroom setting and should be considered eligible for all rights, privileges and services provided by law and local school district policy.
 - b. Any theoretical transmission would most likely involve exposure of open skin lesions or mucous membranes to blood and possibly other body fluids of an infected person.
2. The clinical condition of the infected individual and the risk of others in the school setting to the individual.

For most infected school-age children (and employees) the benefits of an unrestricted setting would outweigh the risk of acquiring potentially harmful infections in the setting.

3. The risk of the infected individual to others in the school setting.

This shall take into account the behavior, neurological development and physical condition of the child (or employee). For some persons, a more restrictive environment is advisable. These include:

- a. Younger children and neurologically handicapped persons who lack control of their body secretions or excretions.
- b. Persons who display such behaviors as biting.
- c. Persons who have uncoverable oozing lesions.

E. If a decision is made to place a student in a more restricted school setting, the state epidemiologist shall be informed in writing by the local public health agency, including rationale for this action.

F. Placement of the infected individual will be reevaluated by the health team prior to each semester and more often if needed.

(Hygienic practices of infected children may improve as the child matures. Alternatively, behavior, physical and neurological status may deteriorate as the disease progresses.)

G. The school nurse, with permission of the infected individual (if an employee) or parent/legal guardian (if a student), shall function as:

1. The liaison with the infected individual (or parent/legal guardian), the individual's physician, the local public health agency, and the school principal.
2. The infected individual's advocate in the school (assist in problem resolution and answer questions).
3. Supervisor of health services provided by other staff.

H. The school nurse or local public health agency shall notify the infected (immuno-depressed) individual (or parent/guardian) when outbreaks of other communicable diseases (such as measles or chicken pox) are occurring in the school population. A decision whether or not to temporarily remove the infected individual shall be made by the individual (or parent/legal guardian) and the individual's physician in consultation with the school nurse and local public health agency.

I. Confidentiality:

1. Knowledge that a staff member or a pupil has an HIV infection shall be confined to the persons informed directly by the staff member, pupil or parent/legal guardian and the local public health agency. The school principal and school nurse will be notified with permission of the infected individual (if an employee or parent/legal guardian (if a student) in order to participate on a health assessment team.

Teaching About AIDS (HIV) Infection

Acquired immunodeficiency syndrome (AIDS) is recognized as a major community health issue. Because of the serious nature of this disease and the importance of preventing its transmission, the River Valley School District shall develop an AIDS education program for implementation in the District.

The District's AIDS education program shall:

1. Present clean and factually accurate information concerning the disease and its transmission.
2. Provide opportunities for participation by students, parents, guardians, citizens and medical experts.
3. Include a sequential curriculum tailored to the students' emotional and intellectual level of development and to their grade level as part of the district's Health Curriculum.
4. Encourage students to practice healthy behavior and develop positive self-concepts.
5. Incorporate staff inservice training about the disease and its transmission and information about the AIDS education program to be presented to students.

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