

453.3-Rule(1)

Lancaster Community School District

Students

COMMUNICABLE DISEASE PROCEDURES

A. Educational and Preventive Measures

1. The District shall ensure that all examinations/inoculations required of students and staff have been obtained.
2. The nurse serving the school shall be responsible for the appropriate maintenance of a health station in each school building. The nurse shall ensure that a list of communicable diseases as defined by the department of health and family services is posted in the health station and that information regarding the suppression and control of communicable diseases is available for review by interested students and staff.
3. Information regarding suppression and control of communicable diseases shall be included as a regular part of the curriculum for students.
4. Information regarding suppression and control of communicable diseases shall be included in orientation sessions for new staff and shall be used periodically in training programs for existing staff.
5. Standard procedures as set forth in the current edition of Control of Communicable Diseases in Man to prevent the spread of communicable diseases transmitted by air (such as tuberculosis, chicken pox, measles, mumps and rubella) or by exchange of body fluids (such as hepatitis A and B, rotavirus, cytomegalovirus, salmonella, staphylococcus aureus and AIDS) and the spread of other conditions (such as pediculosis, scabies and body lice) shall be followed by all staff in the performance of their duties.
6. First aid kits and other supplies and equipment appropriate to reducing the risk of transmission of communicable diseases in the school environment, as determined by the nurse serving the school in cooperation with local public health officials, shall be provided in each school building.

B. Confidentiality/Reporting

1. The principal shall function as the District's liaison with students and staff, parents/guardians and physicians, public health officials and the community at large concerning communicable disease issues in the school.

2. Any person who knows or suspects that a student or staff member has a communicable disease shall report the facts to the school nurse and/or building principal.
3. The principal shall confer with the nurse serving the school and, to the extent circumstances warrant and permit, with the subject of the report and, for student subjects, the student's parent/guardian.
4. If required pursuant to public health statutes and regulations, the nurse shall make a report to the county public health officer.
5. The District shall maintain the confidentiality of the health records of students and staff, and shall not disclose any such records except to the extent required or permitted by law and essential to the safe conduct of the District's operations.

C. Exclusion from School

1. Students

- a. Students who are suspected of having a communicable disease that could be detrimental to the health of self or others in the school environment may be sent home for diagnosis and treatment. Students who are diagnosed as having a communicable disease that renders them unable to pursue their studies or poses a significant risk of transmission to others in the school environment shall be excused from school attendance until their presence no longer poses a threat to the health of themselves or others.
- b. The determination as to whether and under what circumstances a student may be sent home for diagnosis and treatment or excused from school attendance shall be made by the principal, in consultation with the nurse serving the school and, where appropriate, with local public health officials.
- c. The principal may refer this determination to the health care team. If the disease in question appears to require a lengthy period of exclusion or to pose a serious health threat to the student or others (tuberculosis, hepatitis B, and HIV infection, for example), the principal should ordinarily refer the determination to the health care team unless referral to the IEP-Team is warranted.
 - 1) The health care team shall consist of the principal, the nurse serving the school, the local public health agency representative, and--to the extent the cooperation of such individuals can be obtained--the student and/or the student's parent/guardian, and the student's physician. The team shall confer, as necessary, with the District's medical consultant and legal counsel and with state public health officials.

- 2) The principal of the student's or employee's school shall be the designee who shall discuss the issue of confidentiality with parents/guardians or employee.
 - 3) The principal shall inform the District Administrator/ Board of Education of the situation in compliance with legal requirements of confidentiality.
 - 4) The health care team shall convene at the request of the principal to determine whether and under what circumstances a student may be sent home for diagnosis and treatment or excused from school attendance. The health care team may also receive referrals for the purpose of formulating recommendations regarding educational program modification, short of exclusion, that could permit the student to attend school without posing a significant threat to the health of self or others.
 - 5) The principal of the specific school shall explain the decision to the parents/guardians or employee.
 - 6) The principal/school nurse shall provide appropriate information to the classroom teacher or support staff as necessary, in accordance with requirements of confidentiality.
 - 7) The health status of a student temporarily removed from the usual school setting to protect the health of self or others shall be reevaluated by the health care team at regular intervals, (at least monthly) .
- d. For students with previously identified disability or whose communicable disease may give rise to a disability, the principal, in consultation with the District's director of special education, may refer this determination to the individualized education program (IEP)-team. The normal membership of the IEP-team making any such determination should be supplemented to the extent possible by the student's physician and parent/guardian, the local public health officer, and the principal and nurse serving the school.
- e. Before making a determination that a student should be sent home for diagnosis and treatment or excused from school attendance, the principal, health care team, or IEP-team reviewing the case shall, to the extent circumstances warrant and permit, inform the student and the student's parent/guardian of the reasons for the contemplated action and shall consider any information the student and/or the student's parent/guardian may choose to offer regarding the student's condition. If a student is sent home or excused from school attendance pursuant to this procedure, the principal shall immediately notify the student's parent/guardian of the action and the reasons therefor.

- f. Alternative educational opportunities shall be arranged for students who must be excused from school attendance for a significant period of time.
- g. The principal, in consultation with the nurse serving the school and, where appropriate, with local health officials, shall determine when a student who has been excused from school attendance may be readmitted. As a condition of continued or renewed attendance, the District may require a statement from a student's physician that a student is in suitable condition to attend school.

2. Staff

- a. If there is reasonable cause to believe that a staff member has a communicable disease that could be detrimental to the health of self or others in the school environment, the District reserves the right, in consultation with the nurse serving the school and in accord with existing Board policies and/or collective bargaining agreement provisions, to require a medical examination of the staff member at District expense and a physician statement indicating whether the staff member is in suitable condition to continue work.
- b. Staff who are diagnosed as having a communicable disease that poses a significant risk of transmission to others in the school environment or that renders them unable adequately to perform their duties shall be excused from work.
- c. The determination as to whether and under what circumstances a staff member's communicable disease poses a significant health risk to others in the school environment or makes adequate performance impossible shall be made by the District Administrator (or designee), in consultation with the nurse serving the school and, where appropriate, with local public health officials.
- d. Before making a determination that a staff member should be excused from work, the District Administrator shall inform the staff member of the reasons for the contemplated action and shall consider any information the staff member may choose to offer regarding his/her condition. The District Administrator shall also consider whether a reasonable accommodation could eliminate the health risk to the staff member or others and/or permit adequate performance.
- e. The District Administrator shall provide written notice to any staff member excused from work pursuant to this procedure. Staff so excused may utilize any applicable alternative employment opportunities provided under existing Board policies and/or collective bargaining agreement provisions--which may include sick leave, unpaid leave of absence, or reassignment--but are not guaranteed continued or renewed employment except to the extent provided under such policies or provisions.

D. HIV Infection/AIDS

1. General

- a. In addition to maintaining normal confidentiality regarding health records of students and staff, the District shall not disclose the results of a test for the presence of an antibody to HIV except as expressly authorized by the test subject or by law.
- b. Except as authorized by the affected staff member or student and/or student's parent/guardian, knowledge that a student or staff member is HIV-infected shall be disclosed only to those persons with a direct need to know. However, parents/guardians of an infected student decide whether or not to disclose this information to the principal, teacher or nurse. When the student reaches the need for more services than can be provided by the health team, the parents/guardians shall be encouraged to share information regarding diagnosis with health care team members.

2. Students

- a. As a general rule, students with AIDS or evidence of HIV infection shall be allowed to attend school in their regular classroom setting and shall be considered eligible for all rights, privileges, and services provided by law.
- b. Under the following circumstances a student with an HIV infection might pose a risk of transmission to others:
 1. if the student lacks toilet training,
 2. has open sores that cannot be covered,
 3. demonstrates behavior (for example – biting) that could result in direct inoculation of potentially infected body fluids into the bloodstream

If any of these circumstances exist, a local health care team shall determine whether a risk of transmission of HIV exists. The local health care team shall include:

1. student's physician
2. a physician knowledgeable about HIV
3. a local public health agency representative
4. the student's parent/guardian
5. building principal
6. nurse serving the school

If it determined that a risk to the health of other students exists, the student shall be placed in a more restricted school setting.

- c. The responsibility of the health care team shall be to initiate only those physical restrictions necessary to protect the health of the student with HIV infection and health of other students and staff.

The District shall be flexible in its response and attempt to use the least restrictive means to accommodate the student's needs.

The health status of a student temporarily removed from the usual school setting to protect the health of self or others shall be reevaluated at regular intervals (at least monthly) as determined by the local health care team.

- d. The nurse serving the school shall function as:
 - 1. The liaison with the student's parents/guardians, the student's physical and the local public health agency.
 - 2. The student's advocate in the school, assist in problem resolution, answer questions etc.
 - 3. supervisor of the health services provided by other staff.
- e. Parents/guardians of a student infected with HIV are responsible for deciding whether or not to inform the principal or the nurse serving the school about their child's infection.

Records regarding HIV infections shall remain confidential to the extent required by law.

If a student has been diagnosed as having confirmed AIDS, this information shall be reported to the local public health agency and state epidemiologist as required by law.

Based on current medical knowledge and scientific data, mandatory screening of students as a condition of school entry is not warranted.

- f. Some students with an HIV infection may be susceptible and may need to be removed from the classroom for their own protection when cases of measles or chicken pox are occurring in the school population.
The nurse serving the school or the local public health agency shall notify an infected student's parents/guardians when these infections occur in the school.

A decision on whether or not to remove the student shall be made by the student's physician and parents/guardians in consultation with the nurse serving the school and the local public health agency.

- g. Blood or other body fluids emanating from any student, including individuals not known to have an HIV infection shall be treated cautiously.
 - 1. Individuals should wear gloves when cleaning up blood spills
 - 2. Spills should be disinfected with a 1:10 solution of bleach.
 - 3. Blood-soaked items should be placed in leak-proof bags for washing or further disposition.
 - 4. Similar procedures are recommended for dealing with vomitus and fecal or urinary incontinence in any students, because these body fluids may transmit other infectious disease.
 - 5. Hand washing after contact with a student is routinely required only if physical contact has been made with the student's blood or body fluids, including saliva.
- h. The board shall initiate and support a program to inform parents/guardians, students and teachers regarding HIV transmission regardless of whether or not HIV infected students are enrolled. Such education would greatly reduce public and help provide the best care and education for infected students while minimizing the risk of transmission to others. The Board shall review their general infection-control policies with the local public health agency and initiate and support programs to educate school personnel regarding practices that will be instituted to reduce transmission of other infectious diseases in the school setting.

In order to assure uniformity and consistency in application of these recommendations, the Board shall include information on the prevention of HIV transmission in their inservice education sessions for all staff.

3. Staff

- a. The District shall not solicit or require a test for the presence of an antibody to HIV as a condition of employment and shall not affect the terms, conditions, or privileges of employment of any staff member because the staff member obtained such a test.
- b. The District shall not refuse to employ those individuals who have or are suspected of having HIV infection as long as they are able to perform their job and pose no health risks to other employees or students.
- c. Unless an HIV-infected employee is too ill to perform his/her job satisfactorily or unless he/she has open lesions that cannot be covered, employees known to have HIV-infection shall not be restricted from work.

- d. Because persons infected with HIV who have defective immune systems are at increased risk of acquiring or experiencing complications from other infectious diseases, they should be instructed to consult with their personal physician(s) to determine on an individual basis whether they can adequately and safely continue to perform their work assignments.
- e. All epidemiologic and laboratory evidence indicates that bloodborne and sexually transmitted infections are not transmitted during the preparation or serving of food or beverages, and no instances of hepatitis B virus (HBV) or HIV transmission have been documented in this setting.
- f. All food service workers (FSWs) should be instructed to follow recommended standards and practices of good personal hygiene and food sanitation. All FSWs should exercise care to avoid injury to hands when preparing food. Should such an injury occur, food contaminated with blood shall be discarded. FSWs known to be infected with HIV need not be restricted from work unless they have evidence of other infections or illnesses for which any FSW should also be restricted.
- g. No known risk of transmission to co-workers, clients, or consumers exist from HIV-infected workers in other settings (e.g., offices, schools, factories, construction sites). Workers known to be infected with HIV shall not be restricted from using telephones, office equipment, toilets, showers, eating facilities and water fountains. Equipment contaminated with blood or other body fluids of any worker, regardless of HIV infection status, should be cleaned according to established guidelines for handling of body fluids.
- h. HIV infections are transmitted sexually or through blood exposure and are not spread by casual contact or through preparation or service of food or beverages. No routine HIV antibody screening for any employees in any work setting will be done.
- i. Benefit consultation shall be provided by the personnel office to assist HIV affected employees to manage health, leave and other benefits. The intent of such benefit consultation is to control costs and to keep the employee on the job as long as possible.

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