

VENTURA COUNTY BOARD OF EDUCATION

**ADMINISTRATIVE
REGULATION NO. 5141.23**

ADOPTED: 02/24/97

CLASSIFICATION: Students

REVISED:

**SUBJECT: Communicable, Contagious, or Infectious Disease
Control for Students in Schools and Programs
Operated by Ventura County Office of Education**

It is the intent of the Board and the Superintendent to cooperate with local health authorities, other governmental agencies, school and community college districts, students, parents/guardians, and community members to promulgate educational materials, in-service training, and recommended procedures for the prevention and control of severe communicable, contagious, or infectious disease.

SEVERE COMMUNICABLE, CONTAGIOUS, OR INFECTIOUS DISEASE

If there is an identified case of a severe communicable, contagious, or infectious disease among students or prospective students including, but not limited to, Hepatitis, Cytomegalovirus (CMV), Human Immunodeficiency Virus (HIV) infection, Acquired Immune Deficiency Syndrome (AIDS), and Herpes, the course of action shall be determined according to the Education code and recommendations of the California State Department advisories concerning communicable, contagious, or infectious diseases. If appropriate, the Superintendent will be notified by the appropriate division administrator. Decisions regarding the admission, exclusion or alternative placement of students with severe communicable, contagious or infectious diseases will be made on a case-by-case basis and specifically according to this administrative regulation. If further action is deemed necessary, the Superintendent will institute the procedural review process outlined below. Each decision will be based in part on medical advice and the recommendation of a review panel.

PROCEDURAL REVIEW

1. The Superintendent/designee shall convene a review panel composed of:
 - A. The Superintendent/designee (Chairperson).
 - B. The student's parent/guardian.
 - C. The student's physician.
 - D. The Superintendent's appointed medical consultant.
 - E. A health professional from the county Department of Public Health.
 - F. Other appropriate personnel.

2. The parent/guardian and/or the student who has an identified communicable, contagious, or infectious disease shall be notified and shall have the opportunity to provide input for consideration by the review committee. This input may be presented orally and/or in writing.
3. The review committee will assess the student's situation related to the safety of the student, other students, and staff, and to the control of the communicable, contagious, or infectious disease under consideration and make recommendations to the Superintendent. The panel makes recommendations to the Superintendent. The panel will consider: (a) the nature of the risk (how the disease is transmitted); (b) the duration of the risk (how long the carrier is contagious or infectious); (c) the severity of the risk (what is the potential for harm to other parties or to the infected person); (d) the probability the disease will be transmitted and will cause varying degrees of harm; (e) presence of behaviors associated with disease transmission; (f) current medical information; (g) wishes of the parent/guardian.
4. The review committee may consider the safety of the student, other students and employees, and the control of the communicable, contagious, or infectious disease when developing recommendations regarding the placement status of a student with a communicable, contagious, or infectious disease.
5. Within ten (10) working days of the review committee's final meeting, the review committee will prepare and present written recommendations regarding the case to the Superintendent.
6. The student's placement status will be monitored by the appropriate division administrator by communicating with the student's personal physician and other appropriate personnel.

SUPERINTENDENT'S DETERMINATION

The Superintendent will determine the appropriate course of action based in part on medical advice and the recommendations of the review committee. These actions may include a request to submit to an appropriate medical evaluation, the possible exclusion of the student from school or class with alternative educational program options, or other appropriate accommodations. Action shall provide the student with educational opportunities while protecting the health and safety of the infected student as well as the health and safety of other students, staff and public. This action will also take into consideration the established procedures for placement of special education students and for exclusion and expulsion of students in schools and programs operated by the Superintendent. The decision of the Superintendent shall be communicated in writing to the student and parent/guardian, and shall include a copy of the review committee's recommendations when applicable.

RELEASE OF INFORMATION

1. A release of medical information form signed by the student's parent or guardian shall be obtained to provide confidential medical information and records to the panel members and employees who have a legitimate need to know. Such release forms shall be prepared under the direction of legal counsel.

2. Confidential medical records concerning the student's health condition shall be maintained in accordance with law and shall be released only to authorized personnel. These records shall not be released to others without the written approval of the student's parent/guardian or by judicial order.

PRIVACY RIGHTS

1. The number of employees informed of the student's condition shall be the minimum needed to detect situations in which the potential for transmission of the disease may increase.
2. It is the responsibility of all employees to respect the confidentiality of medical information provided to them and the individual's right to privacy. No employee who has access to confidential medical information shall provide the information to any unauthorized person.

NOTE: HEALTH AND SAFETY CODE 121110 SPECIFICALLY PROVIDES PENALTIES OF BETWEEN \$1,000 AND \$5,000 FOR THE DISCLOSURE OF THE RESULT OF A BLOOD TEST TO DETECT AIDS WITHOUT WRITTEN AUTHORIZATION OF THE PERSON TESTED. MOREOVER, IF THIS DISCLOSURE LEADS TO "ECONOMIC, BODILY OR PSYCHOLOGICAL HARM" TO THE PERSON WITH AIDS, THE FINE CAN BE UP TO \$10,000 AND/OR ONE YEAR IN JAIL.

3. In cases where it has been determined that a student with a communicable, contagious, or infectious disease poses a substantial and immediate risk to others in the classroom because of the student's personal habits or the nature of the disease, the employee(s) assigned to work with the student will be notified of potential risks by the appropriate division administrator on a need to know basis.

NEWS MEDIA CONTACT

Legal counsel shall be the authorized spokesperson for matters relating to severe communicable, contagious, and infectious diseases of students in schools and programs operated by the Superintendent. All medical issues related to severe communicable, contagious, or infectious diseases shall be referred to the County Health office.

INSTRUCTIONAL PROGRAMS

The Superintendent shall provide information and resources on communicable, contagious, or infectious diseases.

Infectious disease prevention techniques as appropriate shall be taught to students in schools or programs operated by the Superintendent regardless of whether a student or employee with a communicable, contagious, or infectious disease has been identified within such schools or programs.

PREVENTIVE MEDICAL MEASURES

Due to the possibility that a communicable, contagious, or infectious disease carrier may be undetected, it is essential that information and training on communicable, contagious, or infectious disease prevention techniques be provided to students where appropriate. See Communicable and Infectious Disease Prevention, Appendix II, for specific guidelines to be implemented in all educational programs and Appendix III for additional guidelines for Regional Occupational Program Health Care programs.

REVIEW OF COMMUNICABLE DISEASE POLICY AND REGULATIONS

Policies and administrative regulations related to communicable, contagious, or infectious disease shall be reviewed as appropriate to reflect the latest medical and/or legal considerations.

Legal References:

EDUCATION CODE

48210	Minimum age for public school
48211	Exclusion of children with contagious/infectious diseases
48213	Notice to parent/guardian re: exclusion
48214	Authority to adopt rules/regulations
48222	Exemption from attendance requirements
49061 et seq.	Student Records
49408	Pupil information for emergencies
49451	Right to refuse physical examination of child

HEALTH AND SAFETY CODE

120230	Exclusion from school due to communicable disease
120325	Immunization
120330	Authority for Department's regulations
121075-121095, 121115-121125	AIDS research records and disclosure
121100	Penalty for disclosure of records
121550	Authority of schools to require examination

Federal Legislation

Section 504 of the Rehabilitation Act of 1973 (P.L. 93-112), 19 U.S.C. 702 et seq.
Buckley Amendment of the Family Educational Rights and Privacy Act of 1974 (P.L. 90-147), 20 U.S.C. 1232g
IDEA (P.L. 94-142), 20 U.S.C., Section 1401 et seq. (1993)

APPENDIX 1
COMMUNICABLE AND INFECTIOUS DISEASE PREVENTION
DEFINITION OF TERMS

AIDS-ACQUIRED IMMUNE DEFICIENCY SYNDROME: A disease that breaks down a part of the body's immune system, leaving its victim vulnerable to a variety of life-threatening illnesses.

COMMUNICABLE DISEASE: An illness due to a specific infectious agent or its toxic products which arises through transmission of that agent or its products from an infected person or animal or a reservoir to a susceptible host-either directly as from an infected person, or indirectly, through the agency of an intermediate host.

CONTAGIOUS: A lay term meaning "communicable."

CYTOMEGALOVIRUS (CMV): A virus which has been included in the herpes virus family. It rarely causes symptoms but may affect an unborn infant if the mother becomes infected during the first three months of pregnancy.

HEPATITIS B: A viral infection involving the liver, whose symptoms may include poor appetite, abdominal pain, nausea, vomiting, fever, jaundice, joint pain, and skin rash. Transmission of infection is usually by direct contact with infected blood on open wounds, but may occur from contact with infected saliva on open wounds.

HERPES SIMPLEX: An infectious disease caused by the Herpes Simplex virus. Affected sites usually occur where the mucous membrane joins the skin.

HIV INFECTION - HUMAN IMMUNODEFICIENCY VIRUS: A condition in which a person has developed specific antibodies in response to being exposed to the AIDS virus. This person will be infected for the rest of his/her life and is capable of infecting others even though he/she may not have AIDS.

INFECTED PERSON: A person that harbors an infectious agent and who has either manifest disease or asymptomatic infection from whom the infectious agent can be acquired.

INFECTIOUS AGENT: An organism that is capable of producing infection or infectious disease.

INFECTIOUS DISEASE: A clinically apparent disease resulting from an infection

APPENDIX II

COMMUNICABLE AND INFECTIOUS DISEASE PREVENTION

General Information

1. All references to gloves in this appendix shall mean non-sterile fitted latex disposable gloves.
2. The single most important practice is hand washing. Always lather hands with soap 10-15 seconds and rinse under running water for at least 10 seconds immediately upon removal of gloves, after taking temperatures, examining mouths or weeping eyes, when wiping a runny nose, applying pressure to a bleeding injury or helping a student in the bathroom.
3. Hands should always be washed before drinking, eating and before and after going to the bathroom.
4. Employees who have open lesions or weeping dermatitis should refrain from all direct student care.
5. Resuscitation mouthpieces or CPR face masks should be available and readily accessible in all areas where the need for resuscitation is predictable. Although saliva has not been implicated in HIV transmission, the above items should be used to minimize potential risk during mouth-to-mouth resuscitation.
6. Use sanitary absorbent agents specifically intended for cleaning body fluid spills. The dry material is applied to the area, left for a few minutes to absorb the fluid, then vacuumed or swept up. If a rug, a second step is to apply rug shampoo (germicidal detergent) with a brush and re-vacuum. The vacuum bag or sweepings should be disposed of in a plastic bag. Broom and dustpan should be rinsed in a disinfectant. No special handling is required for vacuuming equipment.
7. Pregnant workers should be especially familiar with and strictly adhere to precautions to minimize the risk of HIV transmission. Although pregnant workers are not known to be at a greater risk of contracting HIV infection than workers who are not pregnant, if HIV develops during pregnancy, the infant is at risk of infection.

Handling Blood and Body Fluids

The following precautions shall be used in the handling of blood and bodily fluids. Taken from "Guidelines for Handling Body Fluids in School", published by the State Department of Education, with additional guidelines for health care workers added as may be appropriate for handling severely handicapped students.

1. Gloves shall be worn when handling or touching blood and body fluids, mucous membranes, non-intact skin, semen, secretions, and when coming in contact with surfaces, materials and objects exposed to them. The following are examples of situations requiring the use of gloves:
2. Situations requiring the use of gloves
 - a. Administering all specialized physical health care procedures such as gastrostomy feedings, catheterization, suctioning (mouth-nose-tracheostomy), colostomy or ureterostomy bag changes, postural drainage and percussion, injections, etc.
 - b. Examination of mouth or weeping eyes.
 - c. Wiping a runny nose.
 - d. Applying pressure to a bleeding injury.
 - e. Helping a student in the bathroom, changing diapers or handling vomitus, urine or feces.

Gloves should be changed after contact with each student.

3. Masks and protective eye wear should be worn during procedures that are likely to generate droplets of blood or other body fluids to prevent exposure to mucous membranes for the mouth, nose and eyes.
4. Gowns or smocks should be worn if soiling of clothing by body fluids, secretions or excretions is anticipated.
5. Hands should be washed thoroughly after removing gowns or gloves.
6. Hands and body surfaces should be washed immediately if they accidentally become contaminated with blood, blood-soiled items, or secretions.
7. Personnel with open skin lesions (such as chapped or cracking skin, eczema, sores, cuts or wounds) must particularly take care to avoid contact with blood, blood-soiled items, or secretions, and should cover their lesions with occlusive dressings or gloves as possible. School personnel should refrain from direct student care.
8. Extraordinary care should be taken to prevent accidental wounds from potentially contaminated sharp instruments, such as needles, scissors, or knives. Needles should never be recapped, removed from disposable syringes or otherwise manipulated by hand. Following use, disposable syringes, needles and all other sharp items that may be contaminated should be placed in a puncture-resistant container for disposal.

9. Blood spills should be cleaned up promptly with a freshly prepared disinfectant solution of bleach (10 parts water to 1 part bleach). Disposable towels should be used whenever possible, and mops should be rinsed in the disinfectant.
10. Articles and clothing soiled with blood should be placed in leak proof plastic bags and labeled "Blood Precautions" for proper disposal or for washing at the individual's home. For specific protocols regarding handling of blood, please refer to the State Department of Education's publication, "Techniques for Preventing the Spread of Infectious Diseases", (see Hepatitis B Protocol).

Cleanup of Body Fluids

The procedure for cleaning up spills of any body secretions is as follows:

1. Wear gloves.
2. Place tissues, paper towels, diapers, pads, gauze, bandages, etc., into a plastic bag, tie the bag and dispose of these materials daily.
3. Place gloves and bag inside second plastic bag.
4. Tie the bag securely, place into the trash and dispose of daily.
5. Clean any soiled surfaces with a disposable towel in a 1:10 solution of chlorine bleach (1 1/2 cups to one gallon of water).
6. Soak mop in chlorine solution and rinse thoroughly. Dispose of water used for cleaning in toilet or special drain.
7. Wash hands with soap and water.*

Laundry Instruction

1. The most important factor in laundering clothing contaminated in the school setting is elimination of potentially infectious agents by soap and water. Addition of bleach will further reduce the number of potentially infectious agents. Clothing soaked with body fluids should be washed separately from other items. Presoaking may be required for heavily soiled clothing; otherwise, wash and dry as usual.

If the material is bleachable, add 1/2 cup household bleach to the wash cycle. If material is not colorfast, add 1/2 cup non-chlorine bleach (e.g., Clorox II, Borateem) to the wash cycle.

* Cold water is adequate

Disposal of Gloves

Gloves are to be disposed of in the following manner:

1. Remove gloves using proper technique. This skill will be demonstrated by the Health Specialist.
2. Place gloves in a wastebasket with other disposable items soiled with body fluids (i.e. diapers, etc.). This wastebasket should be separate from the wastebasket used for other purposes and should have a plastic bag liner. Using proper techniques demonstrated by the health Specialist, the custodian will dispose of this plastic bag containing the soiled items on a daily basis.

APPENDIX III

REGIONAL OCCUPATIONAL PROGRAM HEALTH CARE STUDENTS COMMUNICABLE & INFECTIOUS DISEASE PREVENTION

The following information was developed by Marge Prince, RN - Infection Control Coordinator at St. John's Regional Medical Center and adopted for the Regional Occupational Program Health Career students in clinical areas.

Since we cannot reliably identify infected patients with HIV or other blood-borne pathogens, blood and body fluid precautions should be consistently used for all patients.

1. The reference to gloves may mean sterile or non-sterile disposable latex gloves, depending on use. The curriculum will specify the appropriate glove to be used in specific situations.
2. Gloves should be worn for touching blood and body fluids, mucous membranes, or non-intact skin of all patients, for handling items or surfaces soiled with blood or body fluids, and for performing venipuncture and other vascular access procedures. Gloves should be changed after contact with each patient. Hands should be washed immediately after gloves are removed, and other skin surfaces should be washed immediately and thoroughly if contaminated with blood or body fluids.
3. Masks and protective eye wear should be worn during procedures that are likely to generate droplets of blood or other body fluids to prevent exposure to mucous membranes of the mouth, nose and eyes.
4. Gowns should be worn during procedures that are likely to generate splashes of blood or other body fluids.
5. All health care workers should take precautions to prevent injuries caused by needles, scalpels, and other sharp instruments or devices during procedures; gloves should be worn when cleaning used instruments contaminated with blood or body fluids. Special care must be taken when handling sharp instruments after procedures and during disposal of used needles. To prevent needlestick injuries, needles should never be recapped, purposely bent or broken by hand. Following use, disposable syringes, needles, scalpel blades and all other sharp items should be placed in the puncture-resistant container for disposal located in each patient room and other strategic areas. Re-usable sharps and needles should be placed in a puncture-resistant container for transport to SPD for reprocessing.

6. Mouthpieces, resuscitation bags, and other ventilation devices should be available for use in all areas where the need for resuscitation is predictable and in each patient room. Although saliva has not been implicated in HIV transmission, to minimize potential risk during mouth-to-mouth resuscitation, the above items should be available for each employee to use when needed.
7. CPR Red Carts should contain masks, goggles and several gloves for use during CODES.
8. Employees who have exudative lesions or weeping dermatitis should refrain from all direct patient care and from handling patient-care equipment until the condition resolves.
9. Pregnant health care workers should be especially familiar with and strictly adhere to precautions to minimize the risk of HIV transmission. Although pregnant health care workers are not known to be at a greater risk of contracting HIV infection than health care workers who are not pregnant, if a health care worker develops HIV during pregnancy, the infant is at risk of infection resulting from perinatal transmission.
10. Other isolations and precautions as outlined in the 1987 CDC Guidelines will remain the same and these additional precautions should be employed as necessary, i.e., Strict Isolation, Respiratory Isolation, Contact Isolation, AFB Isolation, Drainage and Secretion precautions and Enteric Precautions. (The 1987 CDC Guidelines are available in each Health Care classroom and a copy is on file in the ROP Administration office.)
11. Health care workers who participate in invasive procedures must routinely use appropriate barrier precautions to prevent skin and mucous-membrane contact with blood and other body fluids of all patients. Gloves, masks and gowns should be worn for all invasive procedures. Invasive procedures are defined as surgical entry into tissues, cavities, or organs or repair of major traumatic injuries.
 - A. In an operating or delivery room, emergency department or outpatient setting;
 - B. Cardiac catheterization and angiographic procedures;
 - C. A vaginal or caesarean delivery or other invasive obstetric procedure during which bleeding may occur;
 - D. The manipulation, cutting or removal of any oral or peroral tissues, including tooth structure, during which bleeding occurs or the potential for bleeding exists. Protective eye wear should be worn for procedures that commonly result in the generation of droplets, splashing of blood or other body fluids, or the generation of bone chips. Gowns should be made of materials that provide an effective barrier when splashing of blood or body fluids exist. Gloves and gowns should be worn when handling the placenta or the infant until blood and amniotic fluid have been removed from the infant's skin and during post delivery umbilical cord care.

12. If a glove is torn or a needlestick or other injury occurs, the gloves should be removed as promptly as patient safety permits.

REFERENCES:

American Academy of Pediatrics recommendations on school attendance for children with AIDS/ARC

Center for Disease Control, Atlanta, Georgia, recommendations published 8/30/85

"Guidelines for Handling Body Fluids in Schools", State Department of Education, December, 1994

Los Angeles County Office of Education Recommendations for AIDS policy

Oxnard Union High School District Infectious Disease Policy draft of 3/86

"Techniques for Preventing the Spread of Infectious Diseases," California State Department of Education, 1983

Ventura County Health Care Agency recommendation to schools regarding AIDS/ARC dated 11/12/85

LEGAL REFERENCES:

EDUCATION CODE

48211	Exclusion of children with contagious/infectious diseases
49450	Authority to make rules for examination of pupils
49451	Right to refuse physical examination of child
49408	Pupil information for emergencies
8252	Procedures for serving and referring child in need of care

HEALTH AND SAFETY CODE

120230	Exclusion of persons from school because of communicable disease
121550	Authority of schools to require examination

CALIFORNIA CODE OF REGULATIONS

5 CCR 202	Exclusion of pupil with contagious disease
17 CCR 2500	Reporting procedure of diseases to local health authority
17 CCR 2508	Reporting of presence of communicable disease

FEDERAL LAW

PL 94-142