

	ABERDEEN SCHOOL DISTRICT	NEPN Code: GBGA-R
	POLICIES AND REGULATIONS	

PERSONNEL

REGULATIONS: EMPLOYEE HEALTH

The School Board recognizes the importance of protecting the privacy rights of employees who have a communicable disease. Therefore, the confidentiality of the infected employee will be protected in the following manner: health information related to the disease will be released only when the employee gives written permission or if it is ordered to be released by the court. The information will be released only to those persons determined by the Superintendent to have a direct need to know.

A staff member who knowingly has contracted a communicable disease that may likely be transmitted in the school setting shall notify their supervisor or building principal immediately. The determination of whether an infected employee be excluded from work activities shall be made on a case by case basis, under the direction of the supervisor or building principal after consultation with the School Health Office.

In situations where the decision requires additional knowledge and expertise, the employee's supervisor will refer the case to the Superintendent or his/her designee to determine the proper course of action. The Superintendent or his/her designee will be responsible for convening the Advisory Committee with a membership which will include the following:

1. Superintendent
2. School Health Coordinator
3. Building Principal or Supervisor

The Advisory Committee, when appropriate, may also consult the following:

1. SD Communicable Disease Advisory Staff
2. The employee's personal physician
3. The employee and/or employees' representative
4. Other appropriate medical personnel as deemed necessary

The Advisory Committee shall consider the following in their deliberations:

1. Type and severity of the communicable disease
2. Guideline recommendations
3. Potential risk to the infected employee and other staff members
4. Expected type(s) of interaction with others in the school setting
5. Physical condition of the school employee

Regulations to be used in the administration of this policy have been written and are to be used in making decisions regarding continued employment or termination.

REGULATIONS FOR EMPLOYEE COMMUNICABLE DISEASES

DISEASE	EXCLUSION RULES
Chicken Pox (varicella)	The employee may attend work after all pox are dry and scabbed.
Cytomegalovirus (CMV)	The employee may attend work. Precautions should be taken by contacts who are immune-suppressed such as those undergoing cancer treatment, organ transplant, debilitating disease, AIDS, or anyone with suspected or known pregnancy. Good hand washing in all cases should eliminate risk of transfer of infection.
Diarrheal Diseases	The employee may attend work once diarrhea has subsided. Good hand washing in all cases should eliminate the risk of transfer of infection. Employees may be excluded from food handling until the physician/health department gives approval.
HIV, Hepatitis B, Hepatitis C or other blood borne diseases	The employee may attend work unless there is potential for blood borne exposure. Consult physician for guidance.
Hepatitis A Infection	The employee may attend work one week after onset of illness or jaundice. Appropriate personal hygiene precautions should be practiced.
Impetigo	The employee may attend work if treatment is verified and covered or dry.
Influenza & Influenza-like Illness	The employee may attend work when fever-free for 24 hours without the use of fever-reducing medication. Additional exclusions may be necessary for documented novel strain or pandemic influenza based on state or federal guidance.
Lice (Pediculosis)	The employee may attend work after treatment.
Measles	The employee may attend work four days after onset of rash.
Meningococcal Disease (Neisseria Meningitidis)	The employee may attend work after 24 hours of antibiotic treatment.
MRSA (Methicillin Resistant Staphylococcus Aureus)	The employee should be excluded only if confirmed MRSA is present from a wound in which drainage is occurring and cannot be covered or contained.
Mumps	The employee may attend work five days after the onset of parotid gland swelling.
Pertussis (Whooping Cough)	The employee may attend work after completing five days of antibiotic therapy.
Pink Eye (Conjunctivitis)	The employee may attend work after the eye is no longer inflamed or under medical treatment.
Ring Worm (scalp, body, athlete's foot)	The employee may attend work if the area is under treatment and covered.
Rubella	The employee may attend work seven days after onset of rash.
Scabies (mites)	The employee may attend work after treatment.
Skin rash without fever	The employee may attend work. Consult physician for guidance.
Streptococcal Infections (Scarlet Fever, Scarletina, Strep Throat) & Streptococcal skin infections	The employee may attend work 24 hours after initiating antibiotic therapy, if clinically well.
Tuberculosis	The employee may attend work upon presentation of a physician's written permission

All communicable diseases must be reported to the Health Office.

Any question pertaining to interpretation of these guidelines should be referred to school health personnel.

EXPOSURE CONTROL - EMPLOYEE REGULATIONS

Universal precautions shall be practiced by all school employees to eliminate or minimize exposure to human blood or other potentially infectious materials.

All human blood and other potentially infectious materials shall be treated as if known to be infectious, regardless of the perceived status of the source individual.

Employee Training - Information regarding this policy and regulation shall be provided to all school employees at the time of initial employment. (employee handbook)

1. Handwashing-Wash hands before and after each student contact with warm water and soap and immediately after gloves are removed. In an emergency situation, if gloves are not available, wash hands and other skin surfaces immediately and thoroughly if contaminated with blood or other body fluids.
2. Gloves-Wear gloves for touching blood or other body fluids, mucous membranes, or non-intact skin, and for handling items or surfaces soiled with blood or body fluids. Wear gloves if hands are chapped or have cuts or abrasions on them. Change gloves after contact with each student.
3. Any surfaces or instruments exposed to blood or other body fluids are to be cleaned with soap and water, then disinfected with:
 - A. A solution of 1:10 household bleach and water, prepared fresh daily or
 - B. E.P.A. approved disinfectant cleaner
4. Disposal
 - A. Supplies used when providing daily first aid or personal care should be placed in a plastic lined trash can.
 - B. Any materials heavily soiled with blood products or other body fluids should be placed in a plastic bag, closed and disposed of in a second plastic bag, which is immediately sealed and taken out to the regular trash pick-up site.
 - C. Blood and other body fluids may be carefully poured down a drain connected to a sewer system.
5. Containers for Sharps-All contaminated sharps (including needles, syringes, lancets, etc.) shall be discarded in puncture resistant, leak proof containers, which are labeled with the biohazard warning. Filled containers will be sealed, collected and disposed of by the District Health Office.
6. Work Area Restrictions-Sink and work stations for food preparation must be separate from personal hygiene care areas.
7. Laundry Procedures-All school laundry shall be considered as if contaminated with blood or other potentially infectious materials and shall be handled as little as possible, using universal precautions.

Student's personal clothing items replaced because they are soiled with urine, feces, vomit, etc., shall be handled using universal precautions. Soiled clothing shall be bagged and sent home with the student for home care.

HEPATITIS B VACCINE REGULATIONS

Employees in casual contact with Hepatitis B carriers in settings such as schools are at minimal risk, and vaccine is not routinely recommended for them. The District shall offer the Hepatitis B vaccine series at no cost to those designated employees who are considered to have occupational exposure.

1. Hepatitis B Vaccine -The following job classifications may be expected to incur occupational exposure and qualify for Hepatitis B testing and vaccine series:
 - School health nurses
 - Employees who are assigned first aid duties
 - Employees working with students with severe special needs
 - Custodians who are responsible for cleaning or disposing of blood or contaminated waste
 - Other employees who are authorized by special situations and/or exposure

Employees have the option to complete or refuse the Hepatitis B vaccine series. Records shall be maintained by the Human Resources Office.

POST-EXPOSURE TO BODY FLUIDS - EMPLOYEE REGULATIONS

Post-exposure - Employees shall receive post- exposure prophylaxis (preventive care) if an exposure incident occurs as a result of the performance of an employee's duties. "Exposure incident" is defined as a percutaneous injury (needlestick or cut with a sharp object)" or contact of mucous membrane, or non-intact skin with blood, tissue or other body fluids that are potentially infectious. An exposure incident would be a situation where personal protective equipment was not used or was ineffective in protecting the employee's skin or mucous membranes from potentially infectious blood or body fluids.

If you experience an exposure incident during the course of your work, immediately follow these steps:

1. Wash needlesticks and cuts with soap and water; flush splashes to the nose, mouth or skin with water; irrigate eyes with clean water, saline, or sterile irrigant.
2. Immediately report the exposure to your supervisor or principal and school health office.
3. Contact your health care provider immediately to determine appropriate follow-up care.
4. Complete the Worker's Compensation First Report of Injury Form and Employee's Report of Injury form. These forms need to be received by the Human Resource Office as soon as possible.

The Human Resource Office will file the claim through Worker's Compensation.

REFERENCE:

Red Book, American Academy of Pediatrics, 29th edition, 2012

Managing Infectious Diseases in Childcare, Schools, A Quick Reference Guide, American Academy of Pediatrics, 3rd edition, 2013

Control of Communicable Diseases Manual, American Public Health Association, 20th edition, 2014.

National Safety Council Bloodborne and Airborne Pathogens Workbook, 2012

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