

These procedures are designed to provide effective precautions against the transmission of disease in the school setting. they apply to students (Policy 3414, Procedure 3414P) and employees and address exposure to blood and other body fluids, viral and bacterial diseases.

The District will follow the guidelines established by the Office of the Superintendent of Public Instruction (OSPI) in the Infectious Disease Control Guide for School Staff (found in the District Health Services manual in each building) and pages 3 and 4 of this procedure regarding control of communicable disease and exclusion from school of students and/or employees with a variety of bacterial or viral communicable diseases.

When any employee becomes aware of the existence of reportable communicable or contagious disease, said employee is expected to immediately notify the superintendent or designee.

In the event of an outbreak of a vaccine-preventable disease in school, the local health officer has the authority to exclude all susceptible employees. All school staff members, because of their close contact with children, should be immunized against TD (Tetanus-Diphtheria), and MMR (Measles-Mumps-Rubella). All employees are encouraged to provide a record of such immunization to the school nurse, however, staff members over thirty (30) years of age are considered naturally immune to measles (only).

Employees inadequately protected must be advised by supervisors of their possible exclusion in the event of an outbreak ("outbreak" is defined as one [1] suspected case). This will be accomplished by notices at staff meetings and/or employee district orientation. An employee who is excluded because of being inadequately protected may use personal leave or sick leave benefit for such purpose and will be on a deduct basis if leave balance is depleted.

A staff member who is aware he/she has contracted a medically-diagnosed reportable disease that could be transmitted in the school setting is expected to notify the superintendent or designee immediately. A reportable disease must be reported to the local health officer.

The fact that a staff member has been tested for a sexually transmitted disease, the test result, and any information relating to the diagnosis or treatment of a sexually transmitted disease must be kept strictly confidential. If the district has a release, the information may be disclosed pursuant to the restrictions in the release.

Any decisions regarding the employee's status shall be made based upon the best medical evidence available.

An employee may apply for and be granted a health leave when approved by the employee's personal physician and, when deemed appropriate, a District appointed medical officer.

Release of information regarding the testing, test result, diagnosis or treatment of an employee for a sexually transmitted disease may only be made pursuant to an effective release and only to the degree permitted by the release. To be effective a release must be signed and dated, must specify to whom the release may be made and the time period for

which the release is effective. Any disclosures made pursuant to a release must be accompanied by the following statement:

"This information has been disclosed to you from records whose confidentiality is protected by state law. State law prohibits you from making any further disclosure of it without the specific written consent of the person to whom it pertains or as otherwise permitted by state law. A general authorization for the release of medical or other information is not sufficient for this purpose."

If a health employee refused to work with an employee who is disclosed as being HIV positive and is medically approved as able to work, job transfer or other work accommodation for the healthy employee will only occur when medically indicated by written order of his/her physician. The medical order must be signed medical statement requesting this job change. In the absence of a medical order, normal transfer procedures will be followed. All disputes will be referred to the Assistant Superintendent, Human Resources, for final disposition.

Infection Control Program:

The district's infection control program shall be consistent with WAC 296-62-08001, Bloodborne Pathogens and the Guidelines for Implementation of Hepatitis B and HIV School Employee Training published by the SPI.

All employees with reasonably anticipated on-the-job exposure to blood or other potentially infectious material shall be identified. Potentially infectious human body fluids are blood, semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood and all body fluids in situations where it is difficult to differentiate between body fluids. Examples of employees with reasonably anticipated risk of exposure include, but are not limited to: school nurses; teachers and assistants in classrooms for the developmentally disabled; communication disorders specialists for such students; coaches or assistants who provide first aid; and designated first aid

providers. All job duties should be evaluated for the risk of exposure to blood or potentially infectious material. The district shall maintain a list of job classifications with reasonably anticipated exposure to blood or other potentially infectious material.

All employees identified as having reasonably anticipated exposure to blood or other potentially infectious material shall be offered the Hepatitis B vaccine at the district's expense. An employee who refuses the Hepatitis B vaccine must have a signed waiver on file with the school district.

If an employee has a specific exposure to blood or other potentially infectious material, the district will provide a free and confidential medical evaluation and follow-up performed by an appropriately trained and licensed health care professional. Any necessary post-exposure treatment shall be provided. In the event of Hepatitis B exposure, the employee may contact Thurston County Health Department or a private provider for treatment within 24 hours of exposure.

Employees with reasonably anticipated exposure to blood and other potentially infectious material shall participate in district-provided training within ten days of employment and annually. the training shall include:

- a general description of bloodborne diseases
- an explanation of modes of transmission of bloodborne pathogens
- an explanation on the use and limitations of methods of control
- information about personal protective equipment
- information on the Hepatitis B vaccine
- a description of procedures to follow if an exposure incident occurs
- an explanation of signs, labels, tags and color coding used to designate biohazards
- where to obtain a copy of WAC 296-62+08001, Bloodborne Pathogens
- an explanation of the district's infection control plan and how to obtain a copy
- how to identify tasks and activities that may involve exposure to blood or other potentially infectious material
- appropriate actions to take in emergencies involving blood or other potentially infectious material

The training shall be provided by a qualified person and shall include opportunities for questions.

The District shall provide training to all employees regarding HIV/AIDS. The training shall be provided by January 1993 or within six months of initial employment whichever is later. The training shall include:

- history and epidemiology of HIV/AIDS;
- methods of transmission of HIV
- methods of prevention of HIV infection including universal precautions for handling body fluids
- current treatment for symptoms of HIV and prognosis of disease prevention
- state and federal laws barring discrimination against persons with HIV/AIDS; and
- state and federal laws regulating the confidentiality of a person's HIV antibody status

Significant new discoveries or changes in accepted knowledge regarding HIV/AIDS shall be transmitted to employees within one calendar year of notification from the OSPI, unless the Department of Health notifies the District that prompt dissemination of the information is required.

The Hepatitis B vaccination status and records regarding any occupational exposure, if any, shall be kept in strict confidence during employment, plus thirty years, for any employee with reasonably anticipated exposure to blood or other potentially infectious material. The records of occupational exposures shall include:

- the employee's name and social security number
- the employee's Hepatitis B vaccination status
- examination results, medical testing and follow-up procedure records
- the health care professional's written opinion
- a copy of information provided to the healthcare professional

The District shall also keep records of training sessions including the dates, a summary of the material, names and qualifications of the trainers and names of employees attending the training. These records shall be kept for three years.

General Prevention Guidelines

- I. Please refer to the Infectious Disease Control Guide for Staff located in the District Health Services Manual at each work site for information related to some 59 specific infectious diseases and suggested prevention and control guidelines.

Below please find general prevention guidelines in relation to body fluids as sources of infectious agents.

- II. Body fluids as sources of infectious agents. No distinction is made between body fluids from persons with a known disease and those from persons with an undiagnosed illness or without symptoms. Body fluids of all persons

should be considered to contain potentially infectious agents. The term “body fluids” include blood, semen, feces, urine, vomit and respiratory secretions.

- A. Table I describes examples of infectious agents that may occur in body fluid and the method of disease transmission.
- B. In order to avoid contact with body fluids, disposable gloves and plastic bags shall be available in school clinics, classrooms, custodial office, preschool and childcare classrooms and first aid kits located in shop areas, school kitchens and home economics classes. They may be ordered via normal supply channels.
 - 1. Gloves should be worn to:
 - a. treat bloody noses;
 - b. provide first aid for injuries involving blood or body fluid drainage;
 - c. change diapers and ostomy bags and assist students in managing fecal incontinence;
 - d. suction tracheotomies;
 - e. catheterize students; and
 - f. handle clothing soils or spills caused by vomit.
 - 2. Used gloves should be removed inside out and disposed of in a plastic bag or lined trash can. Used tissues, diapers and paper towels should also be placed in a sealed plastic bag for disposal, in appropriate dumpster or receptacle.

Body Fluid	Organisms of Concern	Method of Transmission
Blood Cuts/abrasions Nosebleeds Menses Contaminated needles	Hepatitis B virus AIDS virus (HTLV III/LAV) Cytomegalovirus	Bloodstream inoculation through cuts and abrasions on hands Direct bloodstream inoculation
Feces Incontinence	Salmonella bacteria Shigella bacteria Hepatitis A virus	Oral inoculation from contaminated hands
Urine Incontinence	Cytomegalovirus	Bloodstream and oral inoculation from contaminated hands

Respiratory secretions Saliva Nasal discharge	Mononucleosis virus Common cold virus Influenza virus AIDS virus Hepatitis B virus	Oral inoculation from contaminated hands Bloodstream inoculation through cuts and abrasions on hands; bites
Vomit	Gastrointestinal viruses	Oral inoculation from contaminated hands
Semen	Hepatitis B virus AIDS virus Gonorrhea	Sexual contact (intercourse)

- C. In the case of unanticipated contact with body fluids when gloves are not available and following the use of gloves, hands and other affected skin areas should be washed with soap and running water with vigorous friction for approximately 10 seconds.
- D. Differentiation must be made between contaminated and regulated waste. Regulated waste is saturated material which is considered hazardous and requires disposal in the orange hazardous waste bags. Contaminated clothing, towels and other nondisposable washable items should be:
1. placed in plastic bags before being sent home for washing in the case of personal items.
 2. in the case of items belonging to the school, laundered at school, separate from other items, using soap, hot water and one-half cup of household bleach.
 3. disposable items must be placed in plastic-lined containers.
- E. Contaminated environmental surfaces should be cleaned with a detergent/disinfectant such as Bactisol. Disposable cleaning equipment should be placed in a plastic bag after use for disposal. Used water and disinfectant should be disposed of in a toilet or sewer drain. Non-disposable equipment such as dustpans and buckets should be thoroughly rinsed in disinfectant. After use, mops should be soaked in disinfectant and washed in hot water. Rugs should be cleaned with a germicidal detergent rug shampoos and vacuumed thoroughly.

- F. In the case of a known student Hepatitis B carrier, pre-exposure vaccination may be recommended for classroom staff after review by the District’s medical consultant. This recommendation would be based on the age of the student and the student’s ability to independently handle hygiene needs. A preschool student or older student requiring significant adult assistance in meeting hygiene needs may increase the risk of exposure to Hepatitis for staff. In such cases, the cost of the recommended vaccine would be paid by the District.
- III. Persons with common viral infections such as colds and flu will be advised to remain at home:
- A. during the acute phase of the illness, and
 - B. for 24 hours following illness accompanied by fever.

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