

Scappoose School District
Communicable Disease Management Plan
2024-25 School Year

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Introduction

Communicable diseases can be transmitted from person to person by various routes. A basic understanding of how these diseases are transmitted and common prevention measures can help decrease the spread of infections. Early identification of signs and symptoms of communicable disease is of paramount importance to maintain the health of the SSD school population and decrease school absenteeism.

Scappoose School District shall adopt policies and procedures which consider admission, placement and supervision of students with communicable diseases, including but not limited to Hepatitis B (HBV), Human Immunodeficiency Virus (HIV), and Acquired Immune Deficiency Syndrome (AIDS).

1. To protect the public health, an individual who attends or works at a school or child care facility, or who works at a health care facility or food service facility may not attend or work at a school or facility while in a communicable stage of a restrictable disease, unless otherwise authorized to do so under these rules.
2. A susceptible child or employee in a school or children's facility who has been exposed to a restrictable disease that is also a reportable disease for which an immunization is required under OAR 333-050-0050 must be excluded by the school administrator, unless the local health officer determines, in accordance with section (4) of this rule, that exclusion is not necessary to protect the public's health.

Prevention of Disease Transmission

Frequent and thorough hand washing is the primary prevention measure against the spread of communicable diseases. When done correctly, hand washing will help students, school staff and visitors avoid spreading and receiving disease-causing bacteria and viruses. For greatest protection against the spread of disease, hands should be washed thoroughly with soap and water.

- Hand washing (source: [Effective Handwashing per the CDC](#)) It is important to wash hands:
 - After blowing nose, coughing, or sneezing (even if a tissue is used!)
 - After changing a diaper
 - After handling animals or animal waste
 - After recess or gym
 - After touching garbage
 - After using the bathroom or assisting another person in the bathroom
 - Before and after caring for someone who is sick
 - Before and after treating a cut or wound
 - Before eating • Before, during and after preparing food
 - When hands are dirty
- Hand sanitizers -
 - May kill germs, but do not effectively remove particles, such as dirt or body fluids

- Visibly dirty hands should always be washed with soap and water.
- Some bacteria and viruses are not killed by hand sanitizers.
- Check product labels for specific organisms killed.

Prevention: Exposure Avoidance

- All staff and students need to maintain strict adherence to body fluid exposure precautions.
- Report all body fluid contacts with broken skin, mucous membranes (in the nose, mouth or eyes) or through puncture wounds (such as human bites and needle stick injuries) to the school's district nurse and/or administrator.
- Surfaces or objects commonly touched by students or staff (such as desk tops, toys, wrestling mats) should be cleaned at least daily.
- Surfaces or objects soiled with blood or other body fluids should be cleaned and disinfected using gloves and any other precautions needed to avoid coming into contact with the fluid.
 - Remove the spill, then clean and disinfect the surface.

Communicable Disease Transmission Routes

Airborne

- Infection via airborne transmission routes can occur when the germ from an infected person becomes suspended in the air and is then inhaled by another person.
- Examples of airborne diseases tuberculosis, COVID-19, measles, chickenpox; less common diseases like smallpox and SARS
- Prevention of airborne transmission diseases
 - Promote and require (in accordance with Oregon law) available vaccinations against them.
 - Isolate persons with these diseases from public places until they are no longer infectious.

Respiratory Droplet

- Infection can occur when the germ from an infected person's nose or throat comes into contact with the mucous membranes (the eyes, nose or mouth) of another person by coughing, sneezing or spitting.
- Such transfers **occur only at distances of less than 6 feet.**
- Examples of respiratory droplet diseases
 - COVID-19
 - Common cold
 - Influenza (flu)
 - Whooping cough (pertussis)
 - Meningococcal disease
- Prevention of respiratory droplet diseases
 - Cover mouth and nose when coughing and sneezing.
 - Use tissues when coughing and sneezing.
 - Do not reuse handkerchiefs or tissues.
 - Discard tissues promptly in an appropriate waste container.

- Wash hands after discarding tissue.
- If tissues are not available, cough or sneeze into one's sleeve, not into one's hands.
- Stay up-to-date on vaccinations (flu, pertussis, meningococcal)

Direct or Indirect Contact

- **Direct contact:** Infections can spread from person to person by either skin-to-skin contact or skin-to-mucous membrane contact. (Germs that can be spread by respiratory droplet are often spread by this route as well.)
- **Indirect contact:** Infections can spread from contaminated object to person.
- **Examples of diseases spread by contact**
 - Fungal infections (such as "ringworm")
 - Herpes virus
 - Mononucleosis
 - Skin infections (such as Staph and Strep)
 - Influenza (flu)
 - Common cold
 - COVID-19
- **Prevention of diseases spread by contact**
 - Wash hands thoroughly and often. [CDC Handwashing guidelines](#)
 - Always follow work practice controls as required by the Oregon-OSHA Bloodborne Pathogens standard and described in the school district exposure control plan (SDEP) when handling potentially infectious materials or other body fluids (see watermark Appendix I)
 - Cover sores and open areas on skin with a bandage which completely covers the affected area. Make sure that no fluids can leak from the bandage.
 - Wash items contaminated with body fluids, such as saliva, blood, urine, feces, nasal secretions and vomit, following OR-OSHA and CDC Guidelines and District protocol
 - Appropriately clean frequently touched objects in the environment (door knobs, phones)
 - Stay up-to-date on flu vaccination

Fecal

- **Oral Infection** can spread from the stool or fecal matter of an infected person to another person, usually by contaminated hand-to-mouth contact, or by way of contaminated objects, when effective hand washing is not done after toileting or through poor personal hygiene.
- **Examples of fecal-oral diseases**
 - Diarrheal illnesses
 - Hepatitis A
 - pinworms
- **Prevention of fecal-oral diseases**
 - Wash hands thoroughly and often.
 - After using the toilet;
 - After assisting with toileting or diapering;
 - Before eating, handling, or preparing all foods;

- After touching animals.
- Provide training for all students and staff who work in direct student care, food preparation, food service and cleaning.
- Wash toys or other objects with soap or detergent before and after use, followed by an EPA and district approved disinfectant
- Stay up-to-date on Hepatitis A vaccination

Foodborne

- **Foodborne illnesses occur** as a result of eating food that has been improperly handled, prepared or stored.
- **Examples of foodborne illnesses**
 - Diarrheal diseases
 - Hepatitis A
- **Prevention of foodborne illnesses**
 - Practice effective hand washing before touching foods
 - Prohibit any ill student or staff from working in the cafeteria, kitchen or around food preparation, service or clean-up.
 - Store food appropriately; keep cold foods cold and hot foods hot
 - Only commercially prepared and packaged foods can be brought to school for classroom parties.
 - All food preparation and service must be done according to Food Service guidelines and SSD school district policies.
 - A Hepatitis A vaccine is available

Waterborne

- Waterborne illnesses are spread by consumption or exposure to water that has been contaminated with infectious germs.
- The contaminated water may be swallowed or come into contact with the person's skin or mucous membranes.
- **Examples of waterborne illnesses**
 - Diarrheal diseases
 - Skin infections
 - Hepatitis A
- **Prevention of waterborne illnesses**
 - Make effective hand washing mandatory before preparing water for student activity, and after conclusion of the activity and activity clean up (<http://www.cdc.gov/Features/HandWashing/>).
 - Fill and disinfect 'water tables' or activity area immediately before play period with a chlorine bleach solution of 1 teaspoon per gallon of water, freshly mixed each day per district procedure.
 - Wash toys or other objects with soap or detergent before and after use, followed by an EPA and district approved disinfectant.
 - Prohibit ill students and staff from participating in water related activities.
 - Showering after exposure to potentially infectious water can reduce the amount of germs on the skin.
 - Hepatitis A vaccine is available

Bloodborne

- Bloodborne illnesses are spread through very specific and close contact with an infected person's body fluids, such as unprotected sexual contact, sharing needles or drug paraphernalia, by a pregnant mother to her unborn child, blood transfusions (rarely), tattooing or piercing in unlicensed establishments and puncture wounds (needle-stick injuries).
- In the school setting, risk for infections can occur when infected body fluids come into contact with a person's broken skin, mucous membranes or through a puncture wound (e.g. needlestick injury, sharp objects, human bite or fight).
- **Examples of blood-borne illnesses**
 - Hepatitis B, C, and D;
 - HIV/AIDS
- **Prevention of blood-borne illnesses**
 - Wash hands thoroughly and often. (<http://www.cdc.gov/Features/HandWashing/>).
 - Provide continuing education to students and staff regarding risk factors and behaviors.
 - Ensure compliance with the OSHA Bloodborne Pathogen Standard for the school district and employees.
 - Use Standard Precautions for students, school staff and visitors:
 - Assume that all body fluids of all persons have a potential for the spread of infections.
 - Have body fluid clean-up kits available for trained staff to utilize
 - Hepatitis B vaccine is available

Sexual Transmission

- Sexually transmitted infections are spread from person to person through sexual intercourse (including oral and anal sex).
- Some diseases, such as HIV, and Hepatitis B and C, can be transmitted both by bloodborne and sexual routes.
- **Examples of sexually transmitted infections**
 - Gonorrhea
 - Chlamydia
 - Syphilis
 - Herpes
 - Genital warts (human papillomavirus)
- **Prevention of sexually transmitted infections**
 - Provide Oregon's comprehensive sexuality curriculum so that students will be aware of safety issues in this area.
 - Sexuality Education and Risk Behavior Prevention
 - HPV vaccine is available

School Health Resources - Health policy and procedures in the SSD school setting will be developed in collaboration with those trained and/or licensed in the health field, including but not limited to:

- District nurse; registered nurse practicing in the school setting
- Local public health authority

- Community health care providers
- Oregon Occupational Health and Safety Administration (OSHA) •
- Oregon Health Authority, Public Health Division (PHD)
- Additional resources and roles
 - Health education
 - Physical education
 - Health services
 - Nutrition services
 - School counseling, psychological and social services
 - Health School environment
 - Health promotion for staff
 - Family and community involvement
- [CDC recommendations for best utilizing these resources](#)

Communicable Disease Control Measures Guidelines for Exclusion

Part 1: EXPANDED GUIDELINES FOR SCHOOL STAFF

- Symptoms described in the **EXPANDED GUIDELINES FOR SCHOOL STAFF** (See below) should be considered reasons for exclusion until symptoms are resolved for the length of time indicated below **OR** until the student has been cleared by a licensed healthcare provider, unless otherwise noted.
- School personnel considering a student exclusion should also consider the following
 - Only a licensed health care provider can determine a diagnosis or prescribe treatment.
 - The school administrator has the authority to enforce exclusion. [OAR 333-019-0010]
 - The registered nurse (RN) or district/school nurse* can be a valuable resource.
 - Collaboration with the RN may be legally required, especially if health issues relate to a student's chronic condition.
 - "A registered nurse or district nurse is responsible for coordinating the school nursing services provided to an individual student." [ORS 336.201]
 - A RN is licensed to provide "services for students who are medically fragile or have special health care needs" [OAR 581-022-2220; ORS 336.201]. FGCS contracts with the Scappoose School District for nursing services as needed for students who are medically fragile or have special health care needs.
 - *School nurse: an RN certified by the Teacher Standards and Practices Commission to conduct and coordinate school health services. [ORS 342.455]
 - Messages about health should be created in collaboration with those licensed or trained in the health field.
 - The registered nurse practicing in the school setting or the local public health authority should be consulted regarding notifying parents/guardians about health concerns, including describing risks and control measures.

- During times of increased concern about a specific communicable disease, such as a COVID-19, flu or another emergent disease, changes to this guidance may be warranted.
- School administrators should work with local public health authorities regarding screening for illness, reporting of illness, and length of exclusion related to specific symptoms of concern

EXPANDED GUIDELINES FOR SCHOOL STAFF

- Students and school staff who are diagnosed with a school-restrictable disease must be excluded from work or attendance.
- Susceptible students and school staff may also be excluded following exposure to selected diseases, per instructions to the school administrator from the local public health authority or per OHA state-wide posted notices. [OAR 333-019-0010; 333-019-0100]
- Students should also be excluded from school if they exhibit:
 - **Fever:** a measured oral temperature of 100.4°F, with or without the symptoms below.
 - Stay home until temperature is below 100.4°F for 72 hours **WITHOUT** the use of fever-reducing medication such as ibuprofen (Advil), acetaminophen (Tylenol), aspirin.
 - **Skin rash or sores:** ANY new rash if not previously diagnosed by a health care provider OR if rash is increasing in size **OR** if new sores or wounds are developing day-to-day **OR** if rash, sores or wounds are draining and cannot be completely covered with a bandage.
 - Stay home until rash is resolved
 - **OR** until sores and wounds are dry or can be completely covered with a bandage
 - **OR** until diagnosis and clearance are provided by a licensed healthcare provider.
 - **Difficulty breathing or shortness of breath not explained by situation such as exercise:**
 - feeling unable to catch their breath, gasping for air, breathing too fast or too shallowly, breathing with extra effort such as using muscles of the stomach, chest, or neck.
 - Seek medical attention
 - Return to school when advised by a licensed healthcare provider.
 - **Concerning cough:**
 - persistent cough that is not yet diagnosed and cleared by a licensed healthcare provider
 - any acute (non-chronic) cough illness
 - **OR** cough that is frequent or severe enough to interfere with active participation in usual school activities
 - Stay home until 72 hours after cough resolves.
 - If **pertussis** (“whooping cough”) is diagnosed by a licensed healthcare provider, student must be excluded from school until

completion of a 5-day course of prescribed antibiotics or until cleared for return by the local public health authority.

- If **COVID-19** is diagnosed, exclude until cleared for return by the local public health authority.

○ **Diarrhea:**

- three or more watery or loose stools in 24 hours
- **OR** sudden onset of loose stools
- **OR** student unable to control bowel function when previously able to do so
 - Stay home until 48 hours after diarrhea resolves **without medication**.

○ **Vomiting:**

- at least 1 episode that is unexplained
 - Stay home until 48 hours after last episode **without medication**.

○ **Headache** with a stiff neck and fever **OR** headache with recent head injury not yet seen and cleared by licensed health provider.

- **Recent head injury:** see ODE concussion guidance.

○ **Jaundice:**

- yellowing of the eyes or skin (new or uncharacteristic)
 - Must be seen by a licensed prescriber and cleared before return to school

○ **Concerning eye symptoms:**

- Colored drainage from the eyes
- **OR** unexplained redness of one or both eyes
- **OR** eye irritation accompanied by vision changes
- **OR** symptoms such as eye irritation, pain, redness, swelling or excessive tear production that prevent active participation in usual school activities.
 - Students with eye symptoms who have been seen and cleared by a licensed prescriber may remain in school after indicated therapy has been started.

○ **Behavior change**

- unexplained uncharacteristic irritability, lethargy, decreased alertness, or increased confusion
- **OR** any unexplained behavior change accompanied by recent head injury not yet assessed and cleared by a licensed healthcare provider.
 - In case of head injury, consider ODE concussion guidance.

○ **Major health event:**

- may include an illness lasting more than 2 weeks;
- a surgical procedure with potential to affect vital signs or active participation in school activities;
- a new or changed health condition for which school staff is not adequately informed, trained, or licensed to provide care.
 - Student should not be at school until health and safety are addressed.

- School staff should follow appropriate process to address reasonable accommodations and school health service provision in accordance with applicable federal and state laws.
- **Student requiring more care than school staff can safely provide**
 - Student should not be at school until health and safety are addressed.
 - School staff should follow appropriate process to address reasonable accommodations and school health service provision in accordance with applicable federal and state laws.

Part 2: Resources available in [Oregon communicable disease guidelines](https://www.oregon.gov/ode/students-and-family/healthsafety/Documents/commddisease.pdf)
<https://www.oregon.gov/ode/students-and-family/healthsafety/Documents/commddisease.pdf>

- **SIMPLIFIED GUIDELINES: Sample letters to the school community**
 - Do Not Send an Ill Child to School
 - Should I Keep My Child Home
- **Recommended School Action When a Person Exhibits Symptoms of a Communicable Disease or a Health Care Provider Has Diagnosed a Specific Communicable Disease**

Appendices in the Oregon Communicable Disease Guidelines

Oregon Public Health Law: Oregon Administrative Rule 333-019-0010

School Attendance Restrictions and Reporting

Communicable Disease Control Measures: Guidelines for Handling Body Fluids

Communicable Disease Control Measures: Guidelines for Schools with Children Who Have Bloodborne Infections such as HIV, Hepatitis B and C

Communicable Disease Control Measures: References

[OHA/ODE Communicable Disease Guidelines 2024](#)

Centers for Disease Control and Prevention. *Definitions of Symptoms for Reportable Illnesses*.
<https://www.cdc.gov/quarantine/air/reporting-deaths-illness/definitions-symptoms-reportableillnesses.html>. Published June 30, 2017.

Centers for Disease Control and Prevention. *Type of Duration of Precautions Recommended for Selected Infections and Conditions*.

<https://www.cdc.gov/infectioncontrol/guidelines/isolation/appendix/type-durationprecautions.html>
 . Published July 22, 2019.

Contact information: (need to obtain information for inclusion)

Health department

District nurses - Brenda & Tanya

Speech/language Pathologist(s)

Occupational Therapist(s)

Physical Therapists(s)