



GreenWood Charter School

Policy Number: 112

Policy Section: 100

POLICY TITLE: Communicable Diseases

Revision History

Effective Date	Action Date	Revised
March 19, 2020	March 18, 2020	

Board Policy Sections:

- School Board 000 series
- Administration 100 series
- Instruction 200 series
- Student Services 300 series
- Staff policies 400 series
- Business and Operations policies 500 series
- Community 600 series

Communicable Disease Policy

The Utah State Statutes and the State Department of Health defines communicable diseases as follows:

"Communicable disease" means illness due to a specific infectious agent or its products which arises through transmission of that agent or its products from a reservoir to a susceptible host, either directly, as from an infected person or animal, or indirectly, through an intermediate plant or animal host, vector, or the inanimate environment.

A "carrier" of communicable disease is defined as follows:

"Carrier" means an infected person or animal that harbors a specific infectious agent in the absence of discernible clinical disease and serves as a potential source of infection for man. The carrier state may occur in an individual with an infection that is inapparent throughout its course (commonly known as healthy or asymptomatic carrier), or during the incubation period, convalescence, and post-convalescence of an individual with a clinically recognizable disease (commonly known as incubatory carrier or convalescent carrier). Under either circumstance the carrier state may be of short or long duration (temporary or transient carrier or chronic carrier).

Source: Section 26-6-2, Utah Code Annotated, 1953

The Utah State Board of Health has statutory authority to investigate and effectuate control of the causes of communicable diseases including authorization for detection, reporting, prevention and control.

In addition to the statutory authority of the State Department of Health for control of communicable diseases, the Board of Education acknowledges the importance of developing within this district, guidelines for the employment of school district staff infected with Acquired Immunodeficiency Syndrome symptoms (AIDS), Cytomegalovirus (CMV), Herpes Simplex virus (HSV), and HSV related diseases such as chicken pox, shingles, and infectious mononucleosis. The Board of Education will cooperate in educating its employees and its residents and patrons about the risks involved in maintaining an infected employee in a school setting or in an out of school employment setting, recognizing that such information will help in providing optimum care and education for an infected employee while minimizing the risk of transmission to others. The Board will also cooperate with the Utah State Department of Health in assisting its designated authority in the detection, prevention and control of communicable diseases.

DEFINITIONS

AIDS: is caused by a virus (HTLV-3) which attacks the body's immune system, leaving victims especially vulnerable to infection. To date, there is no known cure. The mortality rate ranges between 70% - 90% after two years.

No identified cases are known to have been transmitted in the school or day-care setting or through casual person to person contact. The only known modes of transmission are sexual contact, neonatal contact (birth), blood cells are present in saliva, there is nor evidence that AIDS has been transmitted through saliva or other body fluids, with the exception of those referred to above. AIDS is not as easily transmitted as HSV and HSV related diseases. (As more medical knowledge of AIDS becomes available, this definition may change.)

Caretaker: refers to the teacher or other school personnel responsible for the care and education of the infected child.

Cytomegalovirus: is a member of the herpes family, and is transmitted through secretions of body fluids. Is primarily a threat to pregnant women. Its symptoms are similar to those of mononucleosis (fever, lethargy, headaches, aching muscles) and may sometimes lead to CMV pneumonia.

Employee: is any employee of the school district whether administrator, teacher, certified employee, classified employee, whether employed part time or full time including substitute teachers and teachers' aides, and school aides.

Herpes Simplex Virus: categorized as Type I and Type II. HSV-1 occurs mainly in childhood and is transmitted orally by direct contact with infected secretions. HSV-II, also known as genital herpes, is transmitted through sexual contact. Both types of herpes are evidenced by lesions on the infected person's body, including cold sores. The risk of transmission is greatest when the person has visible or active lesions. Hand washing and cleanliness are the best prevention.

Chicken pox, shingles and infectious mononucleosis are closely related to the herpes virus, and can be transmitted through contact with infected body fluids.

Lesions: are open sore (i.e. cold sores, blisters) on the skin. Active lesions Can secrete and transmit the responsible virus.

Secretions: refers to all body fluids, such as saliva, blood, tears, urine, feces, and oozing lesions.

PLACEMENT IN THE CLASSROOM

Decisions regarding the type of educational setting for children will be based on the behavior, neurological development, and physical condition of the child and the expected type interaction with others in that setting. The child's physician, parent(s) or guardian(s), and those persons involved with the proposed employment setting shall be consulted to assist in weighing the risks and benefits to both the infected child and to others in the setting.

Infected school aged children shall be placed on temporary home study programs until such time as the above-referenced persons who are involved in the medical care and education of the child shall have reached a determination as to the proper educational placement and educational program for the child.

Infected school aged children who are able to confine and control their secretions should be allowed to attend classes and extra-curricular activities in a normal school environment.

Preschool aged children and neurologically handicapped children who are infected with AIDS and who lack control of their secretions or who have uncoverable lesions shall be cared for in a restrictive setting, minimizing the exposure of other children to blood or body fluids.

Preschool aged children and neurologically handicapped children with active herpetic lesions, including chicken pox and shingles, will not be permitted in the classroom unless such lesions can be completely covered. When the lesions have disappeared (usually within a week) the child will be allowed to return to the classroom. The primary responsibility for examining an infected child for lesions or other related symptoms rests with the parent(s) or guardian(s) of the child.

Infected children with frequently active lesions which cannot be covered, or who are unable to control their secretions, will be provided with an appropriate educational program through home study programs.

SPECIAL PRECAUTIONS

Caretakers of an infected child will be informed about the child's condition and educated about the possible modes of transmission of the child's disease.

Caretakers will practice good hygiene techniques, including a thorough hand washing after exposure to an infected child's secretions and before caring for another child. Disposable gloves and gowns will be provided to caretakers in direct contact with the infected children with open lesions or uncontrolled secretions. Any caretakers with open cuts or lesions on their hands must wear gloves when working with infected children.

Cleanliness and avoidance of infected child's secretions are the best prevention.

Soiled surfaces will be promptly cleaned with disinfectants. Mops and other cleaning equipment must be rinsed with disinfectant. Whenever possible, disposable towel and tissues will be used.

RIGHT TO PRIVACY

There is potential for social isolation should an infected child's condition become known to the general public. School personnel and others involved in educating and caring for the child will respect the right to privacy and need for confidentiality. The child's records will be kept confidential. The number of school personnel who will be in contact with the child and informed of the child's condition will be kept at the minimum needed to assure proper care of the child and to detect and avoid situations where the potential for transmission of the disease may increase (i.e. a bleeding injury or open lesions).

POLICY SUBJECT TO CHANGE

As the medical determinations of communicable diseases such as those identified herein become more generally accepted this policy may be subject to change to meet that additional medical information.