



# Communicable Disease in School Settings

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# Public Health Law & Disease Reporting

## 63 O.S. Sec 1-502. Rules & Regulations

- Authorizes the State Board of Health to adopt rules and regulations necessary to prevent and control communicable diseases.

## 63 O.S. Sec 1-502.2. Confidentiality

- Requires that all information and records held or maintained by any state agency or health care provider which identify any person who has a reportable communicable disease shall be confidential

# HIPAA

## Health Insurance Portability and Accountability Act

The Health Insurance Portability and Accountability Act of 1996  
effective 4/14/2003

### Section 262

- “Nothing in this part shall be construed to invalidate or limit the authority, power, or procedures established under any law providing for the reporting of disease or injury, child abuse, birth, or death, public health surveillance, or public health investigation or intervention.”

# FERPA

## Family Educational Rights and Privacy Act

### 34 C.F.R. §99.31(a)(1) and 99.36

- FERPA permits disclosure without written consent in specified emergency situations if the information is necessary to protect the health and safety of the student or other individuals
- Disclosure of personally identifiable information (PII) may be made to “appropriate parties,” which include health agencies
  - Temporarily limited to the period of the emergency and generally does not allow for a blanket release of PII from the students education records

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# Sharing of Information

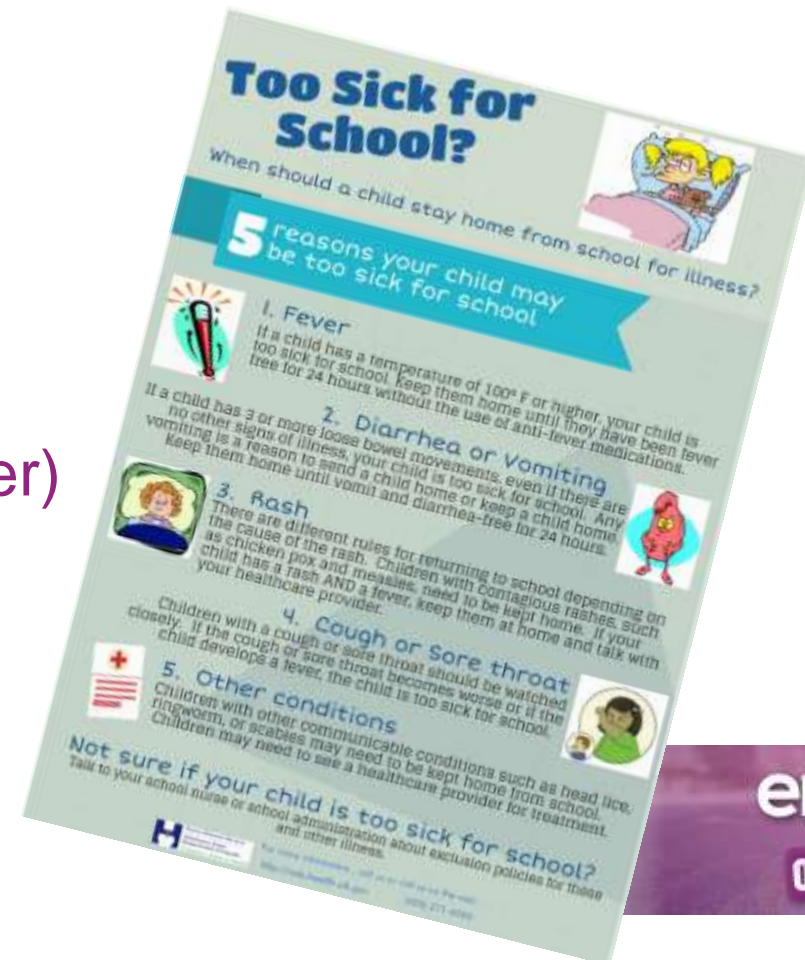
- OSDH ADS may request information about students needed for a public health investigation or outbreak
  - Name, age, date of birth, grade, teacher, attendance/absentee dates
- OSDH may not be able to release certain details about reason for the investigation due to confidentiality reasons
  - i.e., disease name or type
- OSDH will provide schools with as much information as we are able during a public health investigation





# Common Communicable Diseases in School Settings

- Reasons children or staff should not be in school
  - Fever
  - Diarrhea or Vomiting
  - Rash
  - Cough or sore throat (especially with fever)
  - Other conditions...



# Norovirus

- Highly Contagious
  - Close contact
  - Contaminated food or water
  - Contaminated surfaces, objects, or substances
  - Long shedding time and high viral load
- Virus can persist on surfaces for weeks
  - Difficult to kill
  - Cleansers must specify effective against norovirus







# Recommendations for Schools

- Contact health department
- Exclude ill until 72 hours after symptoms
- Wash hands after every encounter with ill
- Post hand hygiene signage
- Recommend postponement of activities
- Maintain same staff
- Non-essential staff and parents should not visit school

# Meningitis

- A *complication* of an infection
- Organism is transmitted not meningitis
- Viral – Most Common:
  - Incubation 3-6 days
  - Symptoms 7-10 days
  - Death is rare – recovery usually complete
  - Medication **NOT** recommended for contacts
- Bacterial:
  - Incubation hours to days
  - Potentially serious disease, disabilities and death
  - Vaccine available for some types
  - Medication **MAY** be indicated for contacts

# Meningitis

- Parent notification not recommended
- Enhanced environmental cleaning not recommended
- If meningococcal disease or Hib:
  - Exposed persons will be contacted directly by county or state health dept.
  - Health department staff may need assistance identifying contacts at risk
  - Mass prophylaxis usually not indicated
- Contacts receiving antibiotics may attend school/activities
- Schools should contact county or state health department when notified of a case of meningitis

# Rash Illness

- Not all rashes require exclusion from school (but sometimes that's hard to determine!)
- Rashes that appear to worsen or accompanied by a fever, should be evaluated by a healthcare provider
- Exclude students/staff from school/activities if rash accompanied by a fever

# Chickenpox (Varicella)

- Caused by a virus
- Spread by contact with lesions or respiratory secretions
- Contagious 1-5 days before rash until lesions are crusted
- Can take 10-21 days from exposure until development of rash
- Lesions occur in crops
- Lesions start on trunk, abdomen, or face rather than arms or legs





# Chickenpox (Varicella)

- **Prevention:** Vaccine, 2 doses after age 1
- **Exclusion:** Exclude from school until all vesicles are crusted
  - Breakthrough infections are contagious
- **Report to County Health Department:**
  - Number ill, symptoms, rash progression
  - Can assist with:
    1. Developing letters
    2. Exclusion recommendations
    3. Vaccination clinic

# Shingles

- Painful rash resulting from reactivation of Varicella (chicken pox) virus
- Exclusion not recommended as long as lesions are covered
- Draining lesions, cover by dressing plus clothing
- If drainage cannot be contained exclusion necessary



Shingles

# Measles

- New cases in U.S.
  - Unvaccinated
  - Foreign travel
- *Highly contagious*
  - Exclude from school at least 4 days after rash appears
- Vaccine: Measles, Mumps, Rubella (MMR)
- **Report suspected case to OSDH immediately**



# Streptococcal Infections

- Bacteria spread person to person
- Contagious until treated with appropriate antibiotics
- Can result in impetigo, strep throat and scarlet fever
- Exclude until after antibiotic treatment for 24 hours



**Impetigo**



**Strep  
throat**



**Scarlet  
Fever**

# *Staphylococcus aureus*

- Normal skin flora
- One of the most common causes of skin infections, usually minor
  - Pimples
  - Boils
  - Impetigo
  - Cellulitis
- Exclusion not recommended
- Keep draining lesions covered





# Influenza and Schools

- Fever and respiratory symptoms caused by a virus
- Person-to-person by respiratory droplets
- Contagious one day before symptoms to 1 week later
- Symptoms occur about 1-5 days after exposure
- Report high absenteeism to county health department
- County health department can:
  - Letters to parents
  - Information resources
  - Other prevention/control measures



# Reducing Flu in the Schools

- Recognize the symptoms of flu
- Remove ill children from classroom
- Send child home
- Exclude from ALL activities for 24 hrs after fever gone
- Increase hand washing or hand sanitizers
- Clean school surfaces frequently



# Infection Control in the School Setting

- *Separate* the ill child from well children
- *Notify* parents/guardians
- *Adhere* to recommendations
- *Implement* strategies to prevent spread
- *Utilize* sanitizing procedures
  - Take extra precautions with handwashing, food handling, and general cleanliness in school environment
- *Currently* vaccinated staff
- *Restrict* immunocompromised staff
  - Pregnant, chemotherapy, etc.

# Exclusion Recommendations

- Varies depending on disease, some common “themes”
  - Fever: until 24 hours after resolved without the use of fever-reducing medications
  - Diarrhea: until 24 hours after diarrhea has ceased
  - Rash: after lesions have crusted over (depends on diagnosis)
  - Skin infections: exclusion not usually recommended unless unable to be covered



# School Role Summary

- Report communicable diseases
- Communicate to parents
- Implement control measures
- Designate health department and media contacts



# Health Department Role

- Outbreak Investigation
  - Meet with school nurse and/or administrative staff
  - Visit school site
  - Interview parents
- Communicate to parents
- Contact Investigation
- Outbreak Management

# Online Resources

Disease-specific facts sheets and infographics are available online at:

<http://ads.health.ok.gov> under  
“Disease Information”

**Questions??**

**Thank You!**