Information Sheet – 10/13/2020 - Board of Trustees Meeting

TO: Board of Trustees Item: 8.2

FR: Celli Coeville

DATE: October 9, 2020

RE: Revised Board Policy and Administrative Regulation, BP/AR 5141.22, Infectious Diseases, Consider for Adoption

Board Policy 5141.22, Infectious Diseases has been updated to reflect NEW LAW (AB 262, 2019) which requires local health officers to notify and update districts of an outbreak, or an imminent outbreak, of a communicable disease and requires districts to comply with any orders issued by the health officers and all applicable privacy laws. The revised policy also clarifies that any allowable exclusions apply only to on-campus instruction and provides that the Superintendent or designee will, when necessary, inform the local health official of any potential outbreak.

The Administrative Regulation has been updated to reflect the current CSBA regulation. The "Prevention and Mitigation Plan" has been added, reflecting general best practices based on COVID-19 guidance. The revised regulation also adds recommendations from CDE's Science Safety Handbook pertaining to experiments involving human blood sampling.

I've highlighted the proposed changes and indicated the differences in red font.

Recommended Action: Approve Revised BP/AR 5141.22, Infectious Diseases

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Note: The following **optional** policy may be modified to reflect district practice.

In order to help protect the safety of students and staff, the Centers for Disease Control and Prevention recommend that districts develop plans for dealing with infectious disease outbreak**s**, including influenza or coronavirus pandemics. These contingency plans should be incorporated into the district's emergency and disaster preparedness plan. See AR 3516 - Emergencies and Disaster Preparedness Plan. Also see the U.S. Department of Health and Human Services' School District (K-12) Pandemic Influenza Planning Checklist for components districts may want to consider when developing and updating emergency and disaster preparedness plans.

The Governing Board ~~of Trustees~~ desires to protect students from risks posed by exposure to infectious diseases while providing ~~an appropriate~~ a high-quality education for all students. The Superintendent or designee shall collaborate with local and state health officials to develop and regularly update a comprehensive plan for disease prevention that promotes preventative measures, mitigation, education, communication, and training of students and staff. All measures to limit the spread of infectious diseases shall be nondiscriminatory and ensure that equity is promoted.

(cf. 0400 - Comprehensive Plans)
(cf. 0450 - Comprehensive Safety Plan)
(cf. 0410 - Nondiscrimination in District Programs and Activities)
(cf. 0415 - Equity)
(cf. 1312.3 - Uniform Complaint Procedures)
(cf. 1400 - Relations Between Other Governmental Agencies and the Schools)
(cf. 3516 - Emergencies and Disaster Preparedness Plan)
(cf. 5141.21 - Administering Medication and Monitoring Health Conditions)
(cf. 5141.26 - Tuberculosis Testing)
(cf. 5141.3 - Health Examinations)
(cf. 5141.31 - Immunizations)
(cf. 5141.32 - Health Screening for School Entry)
(cf. 5141.6 - School Health Services)
(cf. 5145.3 - Nondiscrimination/Harassment)
(cf. 6020 - Parent Involvement)

The Superintendent or designee shall regularly review resources available from health experts to ensure that district programs and operations are based on the most up-to-date information.

The district's comprehensive health education program shall provide age-appropriate information about the nature and symptoms of communicable diseases, their transmission, and how to help prevent the spread of contagious diseases.

(cf. 6142.1 - Sexual Health and HIV/AIDS Prevention Instruction)
(cf. 6142.8 - Comprehensive Health Education)

Note: Pursuant to Health and Safety Code 120175.5, as added by AB 262 (Ch. 798, Statutes of 2019), local health officers are required to promptly notify and update districts during an outbreak of a communicable disease, or upon the imminent and proximate threat of a communicable disease outbreak or epidemic that threatens the public's health, if, in the opinion of the local health officer, action or inaction on the part of the district might affect the outbreak

response efforts. Local health officers are also required to make any relevant information available to districts, including, but not limited to, the locations of concentrations of cases, the number of residents affected, and the measures that districts should take to assist with outbreak response efforts. The local health officers may issue orders to districts to take any action that the health officers deem necessary to control the spread of the communicable disease.

If the local health officer notifies the district of an outbreak of a communicable disease, or the imminent and proximate threat of a communicable disease outbreak or epidemic that threatens the public's health, the district shall take any action that the health officer deems necessary to control the spread of the disease. The district shall comply with all applicable state and federal privacy laws in regard to any such information received from the local health officer. (Health and Safety Code 120175.5)

Note: Pursuant to 8 CCR 5193, employers with one or more employees having occupational exposure to bloodborne pathogens must enforce universal precautions to prevent contact with blood or other potentially infectious materials; see BP/AR 4119.42/4219.42/4319.42 - Exposure Control Plan for Bloodborne Pathogens for a detailed exposure control plan and BP/AR 4119.43/4219.43/4319.43 - Universal Precautions. The following optional paragraph addresses the need for students to follow similar procedures.

Students and staff shall observe universal precautions in order to prevent exposure to bloodborne pathogens and to prevent the spread of infectious diseases.

(cf. 4119.42/4219.42/4319.42 - Exposure Control Plan for Bloodborne Pathogens)
(cf. 4119.43/4219.43/4319.43 - Universal Precautions)

The Superintendent or designee shall inform students of the precautions to be used in cases of exposure to blood or other body fluids through injury, accident, or classroom instruction.

(cf. 5141 - Health Care and Emergencies)
(cf. 6145.2 - Athletic Competition)

Students with Infectious Diseases

Note: In Thomas v. Atascadero Unified School District, a federal court held that acquired immunodeficiency syndrome (AIDS) is a disability under Section 504 of the Rehabilitation Act (29 USC 794) and that a student with AIDS cannot be excluded from school without evidence that the student poses a risk of transmission of the human immunodeficiency virus (HIV) to classmates or teachers. The following paragraph extends this protection to students with any bloodborne pathogen infection. 8 CCR 5193 defines bloodborne pathogens to include the hepatitis C virus in addition to hepatitis B virus and HIV.

The Superintendent or designee shall ~~determine whether to admit a student with an infectious disease, and shall~~ exclude students from on-campus instruction only in accordance with law, Board policy, and administrative regulation. ~~In making this determination, he/she shall consult the student's parents/guardians, the student's physician and/or the county health department, in accordance with law and consistent with confidentiality provisions.~~ Because bloodborne pathogens such as hepatitis B virus, hepatitis C virus and human immunodeficiency virus (HIV)

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are not casually transmitted, the ~~sole~~ presence of ~~bloodborne pathogens~~ infectious conditions of this type is not, by itself, sufficient reason to exclude students from attending school.

(cf. 5112.2 - Exclusions from Attendance)
~~*(cf. 5141.26 - Tuberculosis Testing)*~~
~~*(cf. 5141.3 - Health Examinations)*~~
~~*(cf. 6158 - Independent Study)*~~
~~*(cf. 6159 - Individualized Education Program)*~~
(cf. 6164.6- Identification and Education Under Section 504)
~~*(cf. 6183 - Home/Hospital Instruction)*~~

Note: The following optional paragraph encourages parents/guardians to notify the school if their child has an infectious disease so that staff can assist in maintaining the child's health. However, the

law does not require parents/guardians to inform school officials of a student's medical condition; thus, a student cannot be penalized because the parent/guardian did not provide such notification.

Both state and federal law (Education Code 49060-49069.7; 20 USC 1232g) require that student health information remain confidential. In the event that a parent/guardian authorizes the district to disclose the fact that the student has an infectious disease, it is recommended that any decision to inform staff should be made by the Superintendent or designee, the student, the student's parent/guardian, in consultation with district legal counsel.

Parents/guardians are encouraged to inform the Superintendent or designee if their child has an infectious disease so that school staff may work cooperatively with the student's parents/guardians to minimize ~~the child's~~ exposure to other diseases in the school setting. If necessary, the Superintendent or designee shall inform the local health official of any potential outbreak. The Superintendent or designee shall ensure that student confidentiality and privacy rights are strictly observed in accordance with law. ~~No district employee shall release medical information, including knowledge of a bloodborne pathogen infection, without written consent from the parent/guardian or adult student. Such information shall be shared only with those persons specifically named in the written permission.~~

(cf. 4119.23/4219.23/4319.23 - Unauthorized Release of Confidential/Privileged Information)
(cf. 5022 - Student and Family Privacy Rights)
(cf. 5125 - Student Records)
~~*(cf. 5145.1 - Privacy)*~~

~~The Board requires students and staff to routinely observe universal precautions to prevent exposure to bloodborne pathogens and to prevent the spread of all infectious disease.~~

~~*(cf. 4119.42/4219.42/4319.42 - Exposure Control Plan for Bloodborne Pathogens)*~~
~~*(cf. 4119.43/4219.43/4319.43 - Universal Precautions)*~~
~~*(cf. 5141.23 - Infectious Disease Prevention)*~~

~~The Superintendent or designee shall ensure that the district's health education program provides information about the nature of bloodborne pathogens and their transmission.~~

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~~*(cf. 5141.6 - Student Health and Social Services)*~~
~~*(cf. 6142.2 - AIDS Prevention Instruction)*~~
~~*(cf. 6142.8 - Comprehensive Health Education*~~

Legal Reference:

EDUCATION CODE
48210-482~~14~~ 16 Persons excluded
49060-49069.7 Student records
49073-490~~75~~79 Privacy of pupil records
~~*49076 Access to records by persons without written consent or under judicial order*~~ *49403 Cooperation in control of communicable disease and immunization of students 49405 Smallpox control*
49406 Examination for tuberculosis (employees)
49408 Student emergency i~~I~~nformation ~~of use in emergencies~~
~~*49450 Rules to insure proper care and secrecy 49451 Parent's refusal to consent to medical exam*~~
49602 Counseling and c~~C~~onfidentiality of student information
51202 Instruction in personal and public health and safety
~~*CALIFORNIA CONSTITUTION*~~
~~*Article 1, Section 1 Right to Privacy*~~
CIVIL CODE
56-56.37 Confidentiality of Medical Information Act
1798-~~1798.76~~ 1798.78 Information Practices Act
HEALTH AND SAFETY CODE
120175.5 Local health officers and communicable diseases
120230 Exclusion for communicable disease
120325-120380 Immunization against communicable diseases
120875-120895 AIDS information
120975-~~121020~~ 121023 Mandated blood testing and confidentiality to protect public health
~~*120980 Unauthorized disclosures*~~
~~*121010 Disclosure to certain persons without written consent*~~
121475-121520 Tuberculosis tests for ~~pupils~~ students
CALIFORNIA CONSTITUTION
Article 1, Section 1 Right to Privacy
CALIFORNIA CODE OF REGULATIONS, TITLE 8
5193 Bloodborne pathogen~~ standards~~
CODE OF REGULATIONS, TITLE 17
2500-2511 Communicable disease reporting requirements
UNITED STATES CODE, TITLE 20
1232g Family Educational and Privacy Rights Act 1400-14~~87~~82 Individuals with Disabilities Education Act
UNITED STATES CODE, TITLE 29
794 Section 504 of the Rehabilitation Act of 1973
CODE OF FEDERAL REGULATIONS, TITLE 45
164.500-164.534 Privacy of individually identifiable health information
COURT DECISIONS
~~*Phipps v. Saddleback Valley Unified School District, (1988) 204 Cal. App. 3d 1110*~~
~~*Doe v. Belleville Public School District, (1987) 672 F.Supp. 342*~~
Thomas v. Atascadero Unified School District, (~~1987~~ 1986) 662 F.Supp. 376

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Management Resources:

CALIFORNIA DEPARTMENT OF EDUCATION PUBLICATIONS
Science Safety Handbook for California Public Schools, 2014
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLICATIONS
School District (K-12) Pandemic Influenza Planning Checklist
WEB SITES
CSBA: http://www.csba.org
CDE: http://www.cde.ca.gov
~~*California Department of Health Services: http://www.dhs.ca.gov*~~
California Department of Public Health: http://www.cdph.ca.gov
Centers for Disease Control and Prevention: http://www.cdc.gov
~~*NSBA, School Health Programs: http://www.nsba.org/schoolhealth/*~~

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Note: The following optional administrative regulation may be modified to reflect district practice.

~~**Review Team**~~

~~The parents/guardians of a student with an infectious disease may ask the Superintendent or designee to convene a review panel to make recommendations regarding appropriate programs and services for their child. The review panel may refer the decision to an individualized education program or 504 team as appropriate.~~

~~*(cf. 5141.21 - Administering Medication and Monitoring Health Conditions)*~~
~~*(cf. 6159 - Individualized Education Program)*~~
~~*(cf. 6164.4 - Identification of Individuals for Special Education)*~~
~~*(cf. 6164.6 - Identification and Education Under Section 504)*~~

Prevention and Mitigation Plan

The Superintendent or designee shall work with state and local health officials to develop and regularly update a plan to prevent and mitigate the spread of infectious diseases. Components of the plan may include, but are not necessarily limited to:

1. A communication strategy for informing students, parents/guardians, staff, and the community about the disease(s), including symptoms, complications, transmission, and current recommendations from state and local departments of public health

2. Protocols for assessing when campus closures are necessary and when campus(es) may reopen

3. Alternative means of instruction, schedules, and attendance, including the provision of instruction to students with disabilities, English learners, and foster or homeless youth, in the event of campus closures or partial closures

(cf. 5113 - Absences and Excuses)
(cf. 5113.1 - Chronic Absence and Truancy)
(cf. 6111 - School Calendar)
(cf. 6112 - School Day)
(cf. 6157 - Distance Learning)
(cf. 6158 - Independent Study)
(cf. 6159 - Individualized Education Program)
(cf. 6164.5 - Student Success Teams)
(cf. 6173 - Education for Homeless Youth)
(cf. 6173.1 - Education for Foster Youth)
(cf. 6181 - Alternative Schools/Programs of Choice)
(cf. 6183 - Home and Hospital Instruction)

4. Guidelines regarding preventative measures such as social distancing, personal protective equipment, temperature checks, and/or any other health screening allowed by law

5. Protocols regarding the acquisition and provision of personal protective equipment and other supplies

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6. Procedures for the cancellation or alteration of extracurricular activities and field trips

(cf. 6145 - Extracurricular and Cocurricular Activities)
(cf. 6145.2 - Athletic Competition)
(cf. 6153 - School-Sponsored Trips)

7. Protocols for transportation of students using district vehicles

(cf. 3540 - Transportation)
(cf. 3543 - Transportation Safety and Emergencies)

8. Information on effective hygiene practices

9. Provisions for continuing free and reduced-price meal services

(cf. 3550 - Food Service/Child Nutrition Program)
(cf. 3553 - Free and Reduced Price Meals)

10. Processes for protecting students who are at higher risk from the disease

11. Programs that enhance a positive school climate and foster the emotional well-being of all students

(cf. 5141.5 - Mental Health)
(cf. 5141.52 - Suicide Prevention)
(cf. 6164.2 - Guidance/Counseling Services)

12. Guidelines for cleaning and sanitization of district facilities and equipment

(cf. 3510 - Green School Operations)
(cf. 3514.1 - Hazardous Substances)

13. Protocols for visitors and outside groups that utilize district facilities

14. Staff training

The Superintendent or designee shall immediately report to the local health officer the presence or suspected presence of any communicable disease. (17 CCR 2508)

Universal Precautions in the Classroom

Note: The following standards are based upon the universal precautions required for use by employees pursuant to 8 CCR 5193 and should be modified to reflect district practice. See also the California Department of Education's (CDE) Science Safety Handbook for more information about laboratory safety and universal precautions.

Before students work with blood, blood products, or other body fluids, the teacher shall explain the potentially hazardous nature of blood and body fluids in the transmission of various agents from one person to another and the specific procedures and safety precautions to be used in the lesson.

The following precautions shall be used when students are working with blood or other body fluids:

1. Before and after exposure to blood or other body fluids, students shall wash their hands with soap and water and cover any existing cut, wound, or open sore with a sterile dressing.

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2. Students shall wear gloves or other personal protective equipment as appropriate.

(cf. 5142 - Safety)

Note: CDE's Science Safety Handbook recommends that alternatives to fresh human blood, such as blood that is acquired from a local blood bank that has been tested and found to be free of hepatitis B and human immunodeficiency virus, be utilized for experiments that require blood samples. If the district permits fresh human blood samples from students to be utilized for such purposes, CDE's Science Safety Handbook states that human blood sampling may only occur on a voluntary basis, that the blood draw should be self-administered and performed in a manner consistent with the district's exposure control plan, and that goggles and gloves should be utilized. As students with specified known medical conditions are not permitted to participate, districts should have a process in place which ensures that students with such medical conditions need not share that information with their teacher(s) or other students.

3. Blood typing or similar experiments may be conducted by teacher demonstrations. When being performed individually, students shall work with their own blood or use prepackaged ABO/Rh blood cell kits that have vials of blood previously tested for transmissible agents.

   a. For finger punctures, students shall use individual sterile lancets that have engineered sharps injury protection and shall not reuse them.

   b. Before the finger is punctured, it shall be wiped with a piece of cotton that has been immersed in alcohol.

   c. If bleeding persists after the finger is punctured, the student shall apply a sterile bandage using moderate pressure

4. Lancets and any other materials contaminated with blood or body fluids shall be discarded into a solution consisting of one part bleach to 10 parts water (1:10), made fresh daily.

5. At the end of the class, surfaces shall be wiped with alcohol or a solution of one part bleach to 10 parts water.

(cf. 4119.42/4219.42/4319.42 - Exposure Control Plan for Bloodborne Pathogens)
(cf. 4119.43/4219.43/4319.43 - Universal Precautions)
(cf. 5022 - Student and Family Privacy Rights)
(cf. 6142.1 - Sexual Health and HIV/AIDS Prevention Instruction)
(cf. 6142.8 - Comprehensive Health Education)
(cf. 6142.93 - Science Instruction)