

MEDICAL NEEDS AT SCHOOL & COMMUNICABLE DISEASES RULES FOR HANDLING BODY FLUIDS

Communicable Diseases Rules for Handling Body Fluids

MSD of Wayne employees are required to use "universal precautions" when they have direct contact with blood or other body fluids to prevent dangerous communicable diseases. Failure of employees to use universal precautions may result in disciplinary action and dismissal if warranted.

The following procedures and precautions shall be used throughout the District to minimize the risks of transmission of communicable diseases. These guidelines provide reasonable, simple, and effective precautions for all personnel. The guidelines will be updated as new information or recommendations become available from the State Department of Health.

The procedures shall be followed when dealing with bodily fluids, defined as blood, drainage from scrapes and cuts, feces, urine, vomitus, saliva, and drainage from any orifice (i.e. nose, ears). Materials such as gloves, bleach, and leak proof bags shall be readily available in all schools at a central and easily accessible location. Daily cleaning of staff and student restrooms shall be required in every school.

All personnel will be properly trained each year in awareness and proper procedures. New employees and substitutes will be trained prior to entering the position.

If any employee has reason to believe that a deviation from these procedures has occurred, he or she shall report that deviation to the building principal immediately.

STANDARD "UNIVERSAL PRECAUTIONS" FOR HANDLING BODY FLUIDS

PRINCIPLE 1:

Direct skin contact with body fluids of others shall be avoided when possible.

PROCEDURES:

- a. Appropriate use of protective barriers shall be implemented for procedures or interactions having the potential for creating a spray or splatter of blood or other potentially infectious materials.
- b. Gloves **shall** be worn when direct hand contact with body fluids is anticipated, such as treating bloody noses, doing hematocrit, handling clothes soiled by incontinence or vomit, cleaning small spills by hand, etc.
- c. Gloves and other materials used for this purpose shall be put in a plastic bag or lined trash can. Plastic bags shall be changed daily and disposed of routinely. Double bagging can be used when appropriate.
- d. Gloves shall be kept in all areas of high risk, e.g. health room, maintenance areas, main office, any classroom where risk of spills is particularly high.
- e. When gloves are used, they will be changed and hands washed after each direct contact

with a separate individual.

- f. Students shall be taught to handle their own "body fluids" as appropriate (for age, state of health, etc.). When feasible, students shall dispose of Kleenex after blowing nose, apply pressure to nose and dispose of Kleenex/paper towels used for a bloody nose, wash their own scrapes/cuts, etc.
- g. Students shall be taught good hand washing technique and encouraged to use it routinely.

PRINCIPLE 2:

When direct skin contact or contamination of materials occur from unanticipated skin contact with body fluids (helping a child in the bathroom, vomiting, etc.) proper cleaning technique shall be followed.

PROCEDURES:

- a. Hands and other affected skin areas of exposed persons shall be washed with soap and water after contact. Liquid soap dispensed from a wall dispenser is preferable to bar soap - especially bar soap which sits in a pool of water.
- b. Clothing items that are soaked through to the skin shall be removed, placed in a plastic bag and sent home for laundering. Items laundered for school use, or in school, shall be washed in a hot water cycle (160°F) before reuse. One-half cup of household bleach added to the wash cycle is recommended when feasible.
- c. Contaminated disposable items (tissues, paper towels, diapers) shall be handled with disposable gloves.

PRINCIPLE 3:

Spilled body fluids shall be removed from the environment by proper cleaning technique.

PROCEDURES:

- a. Surfaces and equipment that are potentially contaminated with blood or other potentially infectious materials that need not be sterilized shall be cleaned and disinfected after the nurse treats each student/patient in the health room/nurse's office. Disposable coverings may be used on some surfaces to prevent contamination.
- b. Grossly contaminated environmental surfaces shall be thoroughly cleaned with a freshly prepared solution containing one-half cup of household bleach per gallon of water. A germicide (e.g. Lysol) can be substituted if a bleach solution is unavailable. Disposable gloves shall be worn.
- c. Infectious wastes and disposable cleaning equipment shall be placed in a toilet or plastic bag as appropriate. All sweeper bags shall be placed in a sealed plastic bag and disposed of properly. Containers of infectious waste shall be stored in a secure area prior to final disposal.
- d. Non-disposable cleaning equipment (mops, buckets, brooms, dust pans, etc.) shall be thoroughly rinsed in a bleach solution (as above). The bleach solution shall be disposed of promptly down a drain pipe. Disposable gloves shall be worn.
- e. Maintenance responsibilities shall include daily cleaning with bleach/germicide as in (a) above all areas of high risk for contact with body fluids such as the health room/nurse's office, health room toilet(s), sink(s), student and staff lavatories, gym locker rooms, etc. Plastic bags shall be changed daily and disposed of routinely; disposable gloves shall be worn.
- f. Spilled body fluids on carpets shall be disposed of by routine use of a moisture absorbent, which is then swept/vacuumed, followed by washing carpet with carpet cleaner, etc. Vacuum bags shall be sealed in a plastic bag and properly disposed of.

PRINCIPLE 4:

The clothing of persons at high risk for frequent contact with body fluids shall be protected.

PROCEDURES:

- a. It is recommended that nurses wear laboratory coats in the health room/nurse's office to protect his or her clothing from contamination with body fluids. The nurse may remove the lab coat when he/she goes outside of the health room/nurse's office for non-clinical responsibilities. Such procedures help to prevent unknown transmission of disease.
- b. Clothing and lab coats shall be laundered as above.

To facilitate the smooth implementation of the above regulations, in-service education on communicable diseases and aids shall be provided for newly hired District employees.

Emergency Medical Authorization

The District will distribute annually to parents or guardians of all students the Emergency Medical Authorization Form.

The Emergency Medical Authorization Form will be kept in an easily accessible file in each school building during the school year.

Any time the student is taken out of the District by District employees to participate in a school event (such as field trips, academic contests, music or athletic trips) the employee(s) in charge of the event will take the Emergency Medical Forms for that student. This does not include student spectators at events.

The District will follow the instructions of the Emergency Medical Authorization Form in the event of a medical emergency, provided however that the District will defer to instructions provided by licensed health care professionals and/or first responders on the scene.

Student Emergencies and Accidents

If an accident or emergency occurs on school property; off school grounds at a school activity, function, or event; or traveling to or from school for a school activity, function, or event, the Board directs District employees to take all necessary steps to render assistance to the student in good faith, which may include summoning medical assistance, administering first aid by persons trained to administer first aid, notifying administration, notifying the student's parent, and filing accident reports.

Employees should administer first aid within the limits of their knowledge of recommended practices. The Superintendent may provide for an in-service program on first aid and CPR procedures.

The administrator in charge must submit an accident report to the Superintendent or his or her designee on all accidents.

Administering Medicine at School

The administration of prescribed medication and/or medically-prescribed treatments to a student during school hours will be permitted only when failure to do so would jeopardize the health of the student, the student would not be able to attend school if the medication or treatment were not made available during school hours, or the child has a disability and as a result, requires medication to benefit from his/her educational program.

All medication needed during school hours or at school functions that are supervised by school staff, except those subject to I.C. 20-33-8-13 (student possession and self-administration), will be administered by the nurse, administrator, or designated trained staff under the following conditions:

1. A written authorization form for medication administration must be completed by the parent/guardian and be on file before any medication transported to the health clinic (prescription or non-prescription) will be administered.
 - a. Medication shall be administered in accordance with the instructions printed on the bottle (in the case of non-prescription medicine) or the physician's order (on the case of prescription medicine).
 - b. The consent of the parent shall be valid only for the period specified on the consent form and in no case longer than the current school year.
2. All non-prescription medicine must be kept in its original container accompanied by the package label or package information.
3. All prescription medicine, including medication administered by injection, emergency medication (i.e. Epinephrine, Glucagon), and diabetes monitoring of a student must be accompanied by a physician's order, which is current and correct to the way that the student is to receive the medicine. The nurse may require additional information prior to administering medication.
4. All medication administration will be documented and kept on file in the health office.
5. If the medication is to be terminated prior to the date on the prescription, a withdrawal of consent of the parent is required. The written consent of the parent and the written order of the physician shall be kept on file in the health office.

The District does not honor requests by parents or physicians to administer over-the-counter herbs, minerals and vitamins and other homeopathic products as there is currently no standardization relative to these products and no FDA approval and guidelines.

Any unused medication which is unclaimed by the parent will be destroyed by the District when a prescription is no longer to be administered according to the authorization form, or at the end of the school year.

All designated staff responsible for administering medication to students will be trained by a registered nurse on the proper administration of medication and/or diabetes care. A record of this training will be kept on file in the health office.

All medication, both prescription and non-prescription, must be brought into the nurse's office by a parent or guardian. Only students meeting the criteria of Indiana code who have valid medical authorization and parent permission on file in the school office will be permitted to carry medications and self-administer such substances. These exceptions are explicitly stated in the law and detailed below.

Chronic Disease or Medical Condition

In accordance with Indiana statute, a student with a chronic disease or medical condition may possess and self-administer medication for the chronic disease or medical condition on school grounds immediately before or during school hours, or immediately after school hours, or at any other time when the school is being used by a school group; off school grounds at a school activity, function, or event; or traveling to or from school for a school activity, function, or event, if the following conditions are met:

1. The student's parent has filed an authorization with the student's principal for the student to possess and self-administer the medication. The authorization must include the physician's statement described below in #2.
2. A physician states in writing that:
 - a. the student has an acute or chronic disease or medical condition for which the physician has prescribed medication;
 - b. the student has been instructed in how to self-administer the medication; and
 - c. the nature of the disease or medical condition requires emergency administration of the medication.

The authorization and statement described in subsection (2) must be filed with a student's principal annually.

Students with diabetes, seizures, or chronic diseases shall be appropriately accommodated per Indiana statutes. An appropriate plan for the student, which may be a Section 504 Plan, individual health plan, or IEP, will be developed and implemented.

Transportation of Medications by Students

Medication that is possessed by a school for administration during school hours or at school functions for a student may be released to:

1. The student's parent or guardian;
2. An individual who is at least eighteen years of age and designated in writing by the student's parent or guardian to receive the medication; or
3. The student if the student's parent provides written permission for the student to receive the medication. (Note: This section does not apply to medication possessed by a student for self-administration under Indiana code as specified above).

Do Not Resuscitate (DNR) Orders / Physician Orders for Scope of Treatment (POST) Forms

Each student with a potentially life-threatening medical condition should have a health care plan and/or emergency medical plan. District employees shall follow normal procedures for addressing emergencies occurring while students are on District property (including being transported in vehicles owned, leased, or operated by District); and during District events, even if held outside of District property (for example, prom or field trips).

Therefore, District employees will not adhere to Do Not Resuscitate (DNR) Orders or Physician Orders for Scope of Treatment (POST) forms which prohibit individuals from administering resuscitation (CPR) or medical interventions measures to a student. This policy shall not interfere with a health care provider's obligations under Indiana law.

If the school is presented with a DNR order or POST form, the parent or guardian should be advised of the District's policy and should be directed to the hospital(s) in the area where the student may be transported in an emergency and advised to discuss the order with such facility.

Student Concussions and Sudden Cardiac Arrest

District employees shall abide by legal obligations regarding student athletes and avoiding injuries, including informing and educating coaches, student athletes, and parents of student athletes regarding the nature and risk of concussion, head injury, and sudden cardiac arrest to student athletes. The Board has determined that it may enhance school safety to have an automatic external defibrillator (AED) placed in building(s) within the District for use by employees with proper training. The Board directs the Superintendent to develop guidelines that govern AEDs, including the use of the AED, placement of the AED, training and oversight by a medical doctor or by the local EMS Medical Director.

Immunizations

The School Board requires that all students be properly immunized against vaccine-preventable diseases, in accordance with Indiana Code and the IN State Department of Health (ISDH). Requirements for designated grade levels or ages shall be defined by ISDH annually in the first quarter of the year, for the following school year. (I.C. 20-34-4-2)

The Superintendent shall require parents to furnish to their child's school, no later than the student's first day of school attendance after enrollment, proof of the student's immunization status, either as a written document from the health care provider who administered the immunization or documentation provided from the State immunization data registry. Students whose parents do not provide the required documentation by the opening day of school may be admitted to school provided the documentation is received within twenty (20) school days. If the student remains unimmunized at the close of the twenty (20) school day period, the student may not be permitted to attend school, unless the parents have filed a religious or medical exemption in accordance with state law.

Information concerning meningococcal disease (meningitis) and its vaccine shall be provided to students and parents at the beginning of the school year by the Superintendent or his or her designee. The Superintendent shall consult with the State Department of Education and the State Department of Health to develop necessary information and needed materials.

The parent of each student who is entering grade six (6) shall be provided with information prescribed by the State Department of Health concerning cancer and the human papillomavirus (HPV) infection and that an immunization against the HPV infection is available.

Materials concerning immunizations and immunization preventable diseases shall be provided to parents and guardians of students by each building principal, who shall obtain these materials from the State Department of Education. Posting the materials on the school building's website shall satisfy the distribution requirement.

The Superintendent shall ensure that all applicable immunization information is complete in the State immunization data registry (CHIRP) no later than the first Friday in February each year.

I.C. 20-34-3-18

I.C. 20-34-3-26

I.C. 20-33-8-13

I.C. 20-34-7 *et. seq.*

I.C. 20-34-8

I.C. 34-30-12-1

I.C. 16-36-5-19

I.C. 16-36-6 *et. seq.*

I.C. 20-34-5

I.C. 20-34-4.5-1

I.C. 34-30-14-6

I.C. 16-42-27-1 *et seq.*

I.C. 16-18-2-1 *et seq.*

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