

Students

Communicable/Infectious Diseases

Exclusion Procedures

If it is determined that the interests of the student and the school are better served when a student with a communicable or infectious disease is excluded, procedural safeguards will establish such by extensive medical evidence which shall include, but not be limited to:

- A. The nature of the disease.
- B. Whether transmission may be controlled.
- C. Whether the personal characteristics of the student involved are such that exclusion of the affected student from the regular classroom is clearly necessary to protect the health of other students.
- D. As medical knowledge and circumstances may change rapidly, the school board administrator will monitor current medical information and assess the student's medical condition and the school's ability to accommodate that student in light of the most current medical information. New facts may warrant a different result from the one previously reached.
- E. Where a student or student's parents object to the Board's decision to exclude that student, the Board of Education will provide a hearing to adjudicate pertinent facts concerning the exclusion.

Medical Intervention

The school nurse or medical advisor will establish guidelines which will provide simple, effective precautions against transmission of communicable disease for all students and staff. Universal precautions will be used to clean up after a student has an accident or injury at school. Blood or bodily fluids emanating from any student should be treated cautiously. Such guidelines will be reviewed regularly in light of medical advances. Necessary reports will be made to health authorities consistent with state law.

If emergency exclusion of a student is warranted, regulation will provide procedures to take care of the emergency situation.

Consideration will be given to temporary removal of a student from school, if in the school population, a disease, flu, cold or childhood disease might negatively impact the infected student's health. Students with infectious diseases may be temporarily removed from school when that student is acutely ill.

Students

Communicable/Infectious Diseases (continued)

Classroom and educational programs will be established so that students, staff and the public are better informed of the risk and prevention of transmission of communicable diseases. The school nurse or other medical staff will be available to assist in any problem resolution, answer questions and coordinate services provided by other staff.

Confidentiality

The privacy rights of students with a communicable disease shall be strictly observed by school staff. No person who obtains confidential related medical information may disclose or be compelled to disclose such information except to the following:

1. The protected student or parent.
2. Any person who secures a release of the confidential related information.
3. A federal, state or local officer when such disclosure is mandated or authorized by federal state law.
4. A health care provider or health facility when knowledge of the related information is necessary to provide appropriate care treatment to the protected student and when confidential related information is already recorded in the medical chart or record or a health provider has access to such records for the purpose of providing medical care to that student.

When confidential information relating to communicable disease is disclosed, it should be accompanied by a statement in writing which shall include the following similar language;

"This information has been disclosed to you from records whose confidentiality is protected by state law. State law prohibits you from making any further disclosure without the specific written consent of the student or legal guardian to whom it pertains or as otherwise permitted by law. A general authorization for the release of medical or other information is not sufficient for this purpose."

A notation of all such disclosure shall be placed in the medical record or with any record related to a communicable disease test results of a protected student. Any person who willfully violates the provisions of this law will be liable in a private cause of action for injuries suffered as result of such violation. Damages may be assessed in the amount sufficient to compensate said student for such injury.

Students

Communicable/Infectious Diseases

Health Immunizations/Chickenpox Reporting Requirements

School administrators, with the cooperation of the school nurse will report cases of chickenpox (children and adults) to the State Department of Health. Information regarding demographics and the vaccination status of all cases which the school system's administrators/nurses will be reported on the State form which has the Waterford page number 5141.2(n).

Legal Reference: Connecticut General Statutes
"Education for Children with Disabilities", 20 U.S.C. 1400, et seq.
Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. 706(7)(b).
"Americans with Disabilities Act".
The Family Educational Rights and Privacy Act of 1974, (FERPA), 20 U.S.C. 1232g, 45 C.F.R. 99.
Connecticut General Statutes
10-15b Access of parent or guardian to student's records.
10-19 Teaching about alcohol, nicotine or tobacco, drugs and acquired immune deficiency syndrome.
10-66b Regional educational service centers. Operation and management. Board.
10-76(d)(15) Duties and powers of boards of education to provide special education programs and services.
10-154a Professional communications between teacher or nurse and student.
10-207 Duties of medical advisors.
10-209 Records not to be public.
10-210 Notice of disease to be given parent or guardian.
19a-221 Quarantine of certain persons.
19a-581-585 AIDS testing and medical information.

CONNECTICUT STATE DEPARTMENT OF EDUCATION
CONNECTICUT DEPARTMENT OF PUBLIC HEALTH

Memorandum

To: Superintendent of Schools
From: Leslie M. Aversa Associate Commissioner
Department of Education James L. Hadler, MD, MPH
Director, Infectious Diseases
Department of Public Health
Date: February 28, 2001
Subject: New Chickenpox Reporting Requirements

The lists of Reportable Diseases and Laboratory Reportable Significant Findings are revised annually by the Department of Public Health. As of January 2001, chickenpox has been added to the lists of Reportable Diseases and Laboratory Reportable Significant Findings. In addition to health care providers, school administrators are also required to report cases of chickenpox.

As you know, chickenpox outbreaks can be very disruptive in school settings, sometimes causing severe disease, and often creating difficulties for parents because of the need to keep symptomatic children at home. In the pre-vaccine era, children had the highest risk for acquiring chickenpox (varicella) and they often were the primary source of transmission of varicella to adults, who are at relatively high risk for life-threatening complications from the disease. According to the Centers for Disease Control (CDC), during 1990-1994, varicella was the underlying cause of death each year in an average of more than 100 persons nationally. In addition, chickenpox infection leads to shingles (herpes zoster) later in life. Shingles annually causes 3-4 fold more severe morbidity and contributes to approximately ten times more deaths per year than chickenpox. With rapidly increasing immunization rates in infants and the current requirement for vaccination of school enterers born January 1, 1997 or more recently and of susceptible children entering 7th grade, we expect that most of these problems will be prevented in the near future. In fact, chickenpox in all age groups has dropped more than 80% since 1995.

Given these considerations, surveillance for chickenpox is now practical and needed to: a) determine incidence, especially by age and to monitor trends over time; b) recognize and respond to outbreaks; and c) determine risk factors for infection in children and adults in the vaccine era. Surveillance data will help identify groups or areas with higher than expected risk of disease which will enable us to develop more focused intervention efforts.

School administrators are required to report demographics and the vaccination status of all cases they or their health personnel hear about to the Department of Public Health, using the enclosed Varicella Case Report Form that can be readily photocopied. The completed form should be mailed directly to the state Immunization Program (address at bottom of the form) and to the local health department in which the child resides.

We look forward to working with you to implement the new varicella reporting requirements and to further reduce the extent to which schools are focal points for transmission of chickenpox.

If you have any questions about any of the information presented in this communication or need clarification of other school immunization requirements, please call the state Immunization Program at (860) 509-7929.

Cc: Theodore S. Sergi, Commissioner of Education
School Medical Advisors; School Nurse Supervisors