

WEST VIRGINIA
SECRETARY OF STATE

BETTY IRELAND

ADMINISTRATIVE LAW DIVISION

Form #5

Do Not Mark In This Box

FILED

2006 MAY 12 P 2:25

OFFICE WEST VIRGINIA
SECRETARY OF STATE

NOTICE OF AGENCY ADOPTION OF A PROCEDURAL OR INTERPRETIVE RULE
OR A LEGISLATIVE RULE EXEMPT FROM LEGISLATIVE REVIEW

AGENCY: West Virginia Board of Education TITLE NUMBER: 126

CITE AUTHORITY: W.Va. Constitution, Article XII, §2, W.Va. Code §§16-3-4, 16-3-4a, 16-3-5, 16-3C-1 through 16-3C-9, 18-2-5, 18-5-9, 18-5-22, 18-5-34 and 18A-51.

RULE TYPE: PROCEDURAL _____ INTERPRETIVE _____

EXEMPT LEGISLATIVE RULE X

CITE STATUTE(S) GRANTING EXEMPTION FROM LEGISLATIVE REVIEW

W.Va. Code §§ 29A-3B-1, et seq.; W.Va. Board of Education v. Hechler, 180 W.Va. 451; 376 S.E.2d 839 (1988).

AMENDMENT TO AN EXISTING RULE: YES X NO _____

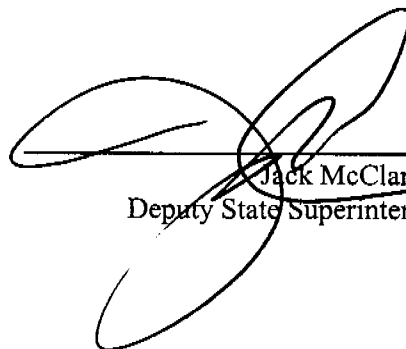
IF YES, SERIES NUMBER OF RULE BEING AMENDED: 51

TITLE OF RULE BEING AMENDED: Communicable Disease Control (2423)

IF NO, SERIES NUMBER OF NEW RULE BEING PROPOSED: _____

TITLE OF RULE BEING PROPOSED: _____

THE ABOVE RULE IS HEREBY ADOPTED AND FILED WITH THE SECRETARY OF STATE. THE EFFECTIVE DATE OF THIS RULE IS July 1, 2007.


Jack McClanahan
Deputy State Superintendent of Schools

**EXECUTIVE SUMMARY
AND
Professional Development Brief
FOR
WEST VIRGINIA BOARD OF EDUCATION POLICY**

Policy Number and Title: Policy 2423: *Communicable Disease Control*

Background:

- The current policy has not been revised since 1991. The policy repeal and replacement evolved from a need to bring this policy in alignment with current practice and research based standards for controlling communicable diseases in the school setting.
- Several W.Va. Code sections support this policy §18-2-9, 18-5-15d, 18-5-22, 18A-5-1, 16-3-4, 16-3D-3, 16-3-5, 16-3C-1 thru 16-3C-9.

Major Revisions or Reasons for New Policy:

- Revisions to Policy 2423 are being recommended to establish the standards that must be placed in county policy for addressing issues and educating students and school personnel on communicable diseases.
- See specifically Section 5 and 6 for the proposed revision including Disease Prevention and Control measures.

Impact:

- The proposed revision would enhance disease prevention measures and align with Policy 2525- West Virginia's Universal Access to Early Education System.
- The proposed revision would enhance disease prevention measures by requiring grades 6 and 9 to show proof of adolescent immunizations within one year of entry into each grade without causing any interruption to the educational process.
- The requirement for an educational inservice on the prevention, transmission and treatment of current communicable diseases will be offered on WVLeads by the Office of Healthy Schools to assist counties in meeting this requirement every two years.

Response to Comments:

- Comments were received from 8 individuals representing a special education director and school nurses. Many of the comments requested clarification to Section 5 regarding immunizations. Language was added to clarify these sections of the policy. Other comments pertained to questions regarding Section 5, which

have been clarified with the additional language. Please review the public comment log for Policy 2423. The accepted public comments can be seen below in red font.

- “West Virginia Education Information System (WVEIS)” is a comprehensive, uniform, integrated, on-line management information system (MIS) for schools and county school systems (districts). The system began implementation in 1991 with all schools and districts currently participating. The system provides for doing the business of the schools and districts in areas such as student demographics, special programs participation, grades, schedules, attendance, payroll, accounts payable, warehousing, student health records, immunizations, etc. Districts submit to the West Virginia Department of Education data from WVEIS required for state and federal reporting.
- All children entering a ~~West Virginia public school~~ prekindergarten (Pre-k), kindergarten and a West Virginia public school for the first time must have immunizations and show proof upon enrollment as defined by the ~~WVDHHR State Health Officer~~ W.Va. Code §16-3-4. All Pre-k students shall also meet requirements in 126CSR28 West Virginia Board of Education Policy 2525, West Virginia’s Universal Access to a Quality Early Education System.
- Students entering in grades six and nine must have adolescent immunizations such as but not limited to, tetanus and diphtheria toxoids and acellular pertussis (Tdap) and Meningococcal conjugate (Menactra) vaccines, and show proof upon entrance or within twelve months of entrance as defined by the WVDHHR State Health Officer. The immunization record shall be entered and reviewed annually into the West Virginia Education Information System (WVEIS).
- The intent of requiring grades six and nine to show proof of immunizations is not to prevent active participation in school unless warranted by the WVDHHR or the local medical director in response to a health or safety emergency situation.
- An educational inservice on the prevention, transmission and treatment of current communicable diseases shall include, but not limited to, human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS), shall be provided to all school personnel every two years by the county boards of education, as specified in W. Va. Code §18-2-9 and §158-5-15d.
- The administrator or school nurse shall exclude from the school any pupil or pupils known to have or suspected of having any infectious disease known to be spread by casual contact and is considered to be a health threat to the school population. The superintendent has the authority to exclude a staff member from school when reliable evidence or information from a qualified source confirms him/her of having a potential communicable disease ~~or infestation~~ that is known to be spread by any form of casual contact and is considered a health threat to the school population. Such a student or staff member shall be excluded in accordance with guidelines of American Academy of Pediatrics and WVDHHR unless his/her physician approves school attendance and the condition is no longer considered contagious. All reportable communicable diseases will be referred to the county health department, without disclosure of personally identifiable information, as set forth in West Virginia Bureau for Public Health Legislative Rule 64CSR7, Reportable Diseases, Events and Conditions. The county health department is able to provide reportable communicable disease guidance or go to <http://www.wvdhhr.org/idep/#Disease%20%20Reporting>.

**TITLE 126
LEGISLATIVE RULE
WEST VIRGINIA BOARD OF EDUCATION**

**SERIES 51
COMMUNICABLE DISEASE CONTROL (2423)**

§126-51-1. General.

1.1. Scope. - The legislative rule requires establishment of county policies related to communicable disease control.

1.2. Authority. - West Virginia Constitution, Article XII, §2, W. Va. Code §§16-3-4, 16-3-4a, 16-3-5, 16-3C-1 through 16-3C-9, 18-2-5, 18-5-9, 18-5-22, 18-5-34 and 18A-5-1.

1.3. Filing Date. - May 12, 2006.

1.4. Effective Date. - July 1, 2007.

1.5. Repeal of Former Rules. - This rule amends W. Va. 126CSR51 "Communication Disease Control Policy (2423)," filed June 5, 1991 and effective July 15, 1991 and repeals and replaces W. Va. 126SR50A "AIDS Education Policy (2422.4)," filed August 8, 1989 and effective September 20, 1989 and W. Va. 126CSR50B "Exclusion of Students from AIDS and STD Instruction in Health Education Classes (2422.45)," filed January 18, 1990 and effective March 2, 1990.

§126-51-2. Purpose.

2.1. Good health and safety are essential to student learning. The education and monitoring of communicable diseases during the school year is necessary to keep students healthy and learning. This policy establishes the standards that must be placed in county policy for addressing issues and educating students and school personnel on communicable diseases. The knowledge of standard/universal precautions, transmission, prevention and treatment of communicable diseases will enhance health education, prevention and equality for all.

2.2. The objective of this policy is to allow for procedures to be in place for detection of potential communicable diseases, inclusion and exclusion, standard/universal precautions and enhancement of knowledge to ensure preventative measures occur for students and school personnel. This policy will assist in developing a working relationship with school personnel, parents/guardians, the students' medical home and the local health department while decreasing duplication of health services offered by the school and the medical home and/or the community serving the students.

TITLE 126
LEGISLATIVE RULE
WEST VIRGINIA BOARD OF EDUCATION

FILED
2006 MAY 12 P 2:26

SERIES 51
COMMUNICABLE DISEASE CONTROL (2423)

OFFICE WEST VIRGINIA
SECRETARY OF STATE

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§126-51-3. Application.

3.1. County boards of education shall develop or amend communicable disease policies to reflect understanding of disease transmission in the school setting and to reflect understanding of student/staff rights to attend school or remain employed. The goal of the policy is to protect individual students, staff members and the school population in general.

3.2. The potential for unnecessary exclusion from the school setting is cause for concern. This problem makes it necessary for counties to develop a policy that is protective of the educational process and the health and safety rights of students and staff.

3.3. Each county should seek the assistance of school nurses, school personnel, parents and guardians, public health, medical personnel and community leaders in developing the communicable disease policy. Technical assistance will be provided by the West Virginia Department of Education to any county upon request.

3.4. The county school system will work cooperatively with the county health department to enforce and adhere to the W. Va. Code §§18A-5-1, 16-3-4, 16-3D-1, 16-3-5, 16-3C-1 through 16-3C-9, 18-2-5, 18-5-9, 18-5-22, and 18-5-34 for prevention, control and containment of communicable disease in schools.

§126-51-4. Definitions.

4.1. "Airborne Pathogens" are defined as the transmission of infectious agents through either airborne droplet nuclei (small-particle residue [five μm or smaller in size] of evaporated droplets that may remain suspended in the air for long periods of time) or dust particles containing infectious agents. These pathogens include but are not limited to tuberculosis (TB), rubella (measles) and varicella (chickenpox).

4.2. "Airborne Precautions" are not normally utilized in the school setting. It is defined as the isolation of an airborne pathogen to reduce the risk of airborne transmission of infectious agents. Airborne precautions entail wearing a respiratory protection mask (N95 respirator) when entering the room of a student receiving home/hospital instruction with known or suspected disease transmitted via airborne droplet nuclei, student placement in private hospital room with negative air pressure and placing a mask on the student for hospital transporting.

4.3. "American Academy of Pediatrics" also known as the AAP, is defined as a national organization of pediatricians, founded in 1930, committed to the attainment of optimal physical, mental, and social health and well-being for all infants, children, adolescents, and young adults.

4.4. "Blood Borne Pathogens" means pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, human immunodeficiency virus (HIV), acquired immunodeficiency syndrome (AIDS), hepatitis B virus (HBV) and hepatitis C virus (HCV).

4.5. "Casual Contact" means day-to-day interaction between individuals and others in the home, at school or in the work place. It does not include intimate contact, such as sexual or drug use interactions, and it implies closer contact than chance passing in the hallway or sharing a lunch table.

4.6. "Centers for Disease Control and Prevention" also known as CDC, is defined as one of the thirteen major operating components of the United States Department of Health and Human Services (USDHHS), which is the principal agency in the United States government for protecting the health and safety of all Americans and for providing essential human services, especially for those people who are least able to help themselves. CDC remains at the forefront of public health efforts to prevent and control infectious and chronic diseases, injuries, workplace hazards, disabilities and environmental health threats.

4.7. "Communicable Disease" means a disease that may be transmitted directly or indirectly from one individual to another.

4.8. "Direct Contact" means a disease that is spread through the exposure of blood and/or body fluids to mucus membranes, open skin wounds, semen or intravenous transfusion. HIV/AIDS is spread by direct blood transmission into the blood stream of another and by semen or vaginal fluid contact. Hepatitis A can be spread by direct or indirect contact with feces while Hepatitis B and C can be spread by direct contact with semen and blood. These diseases do not pose a risk in school if body fluids such as blood and feces are handled using standard/universal precautions.

4.9. "Droplet Contact" means contact of the conjunctivae or the mucous membranes of the nose or mouth of a susceptible person with large-particle droplets (larger than five μm in size) containing microorganisms generated from a person who has a clinical disease or who is a carrier of the microorganism. Droplets are generated from the source person primarily during coughing, sneezing, or talking and during the performance of certain procedures such as suctioning. Transmission via large-particle droplets requires close contact between source and recipient persons, because droplets do not remain suspended in the air and generally travel only short distances, usually three feet or less, through the air. These pathogens include, but are not limited to, bacterial infections, such as Pertussis (whooping cough), streptococcal (group A) pharyngitis, pneumonia or scarlet fever, Diphtheria (pharyngeal), Haemophilus influenzae type b and Neisseria meningitis disease, including meningitis, pneumonia and sepsis. Serious viral infections spread by droplet contact include but are not limited to adenovirus, influenza (flu), mumps and rubella (German measles).

4.10. "Droplet Precautions" is defined as droplet pathogen isolation utilized around individuals known or suspected to be infected with microorganisms transmitted by droplets (large-particle droplets [larger than five μm in size] that can be generated by the person during coughing, sneezing, talking, or the performance of procedures). Droplet precautions entail being in the a private environment, like the student's home, wearing a mask while within three feet of the individual infected and utilizing standard/universal precautions. Because droplets do not remain suspended in the air, special air handling and ventilation are

not required to prevent droplet transmission. Masks may be worn to protect the health of a student who is immunocompromised.

4.11. "Health or Safety Emergency Situation" is determined on a case-by-case basis, and is defined as a specific situation that presents imminent danger or threat to students or other members of the community, or requires an immediate need for information in order to avert or diffuse serious threats to the safety or health of a student or other individuals. Any release of confidential medical information must be narrowly tailored considering the immediacy and magnitude of the emergency and must be made only to parties who can address the specific emergency in question. This exception is temporally limited to the period of the emergency and generally does not allow a blanket release of personally identifiable information from a student's education records to comply with general requirements under state law. Certainly an outbreak of diseases such as measles, rubella, mumps, and polio not only pose threat of permanent disability or death for the individual, but have historically presented themselves as epidemic in nature. Thus, disclosure of personally identifiable information from students' education records to state health officials for an outbreak of a communicable disease would generally be permitted under Family Educational Rights and Privacy Act's (FERPA) health or safety emergency provisions.

4.12. "Immunocompromised" is defined as reduced immune response due to immunosuppressive drugs, radiation, disease or malnutrition.

4.13. "Legitimate Educational Reason" is defined as school officials who have been determined to have genuine concern related to the student's educational achievement and performance allowing access and review pertinent educational records including medical and health information. A record of disclosure must be maintained and include: (1) the parties who have requested the information from the education records, and (2) the legitimate interests the parties had in requesting or obtaining the information.

4.14. "Occupational Safety and Health Administration (OSHA)" is defined as a division of the United States Department of Labor that provides standards and guidelines for the health and safety of America's workers by setting and enforcing standards; providing training, outreach, and education; establishing partnerships; and encouraging continual improvement in workplace safety and health.

4.15. "School Nurse" is defined as a registered professional nurse, licensed by the West Virginia Board of Examiners for Registered Professional Nurses (W. Va. Code §30-7-1, et seq.), who has completed a West Virginia Department of Education approved program as defined in 126CSR114 West Virginia Board of Education Policy 5100, Approval of Educational Personnel Preparation Programs and meets the requirements for certification contained in 126CSR136 West Virginia Board of Education Policy 5202, Minimum Requirements for the Licensure of Professional/Paraprofessional Personnel and Advanced Salary Classification. The school nurse must be employed by the county board of education or as specified in W. Va. Code §18-5-22.

4.16. "Standard/Universal Precautions" is a body substance isolation approach to

infection control. Standard Precautions apply to 1) blood; 2) all body fluids, secretions, and excretions, except sweat, regardless of whether or not they contain visible blood; 3) non-intact skin; and 4) mucous membranes. According to the concept of standard/universal precautions, all human blood and all other human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens. There are three types of transmission: contact, airborne and droplet.

4.17. "West Virginia Department of Health and Human Resources (WVDHHR)" is the lead public health agency in West Virginia working to help shape the environments within which people and communities can be safe and healthy.

4.18. "West Virginia Education Information System (WVEIS)" is a comprehensive, uniform, integrated, on-line management information system (MIS) for schools and county school systems (districts). The system began implementation in 1991 with all schools and districts currently participating. The system provides for doing the business of the schools and districts in areas such as student demographics, special programs participation, grades, schedules, attendance, payroll, accounts payable, warehousing, student health records, immunizations, etc. Districts submit to the West Virginia Department of Education data from WVEIS required for state and federal reporting.

§126-51-5. Disease Prevention Measures.

5.1. All county boards of education must incorporate hand washing, as defined and outlined in The Basic and Specialized Health Care Procedures Manual for West Virginia Public Schools that accompanies 126CSR25A, West Virginia Board of Education Policy 2422.7, Standards For Basic and Specialized Health Care Procedures, into the county board of education communicable disease policy. It is best practice to wash the hands with soap and clean running water for twenty seconds. However, if soap and clean water are not available, use an alcohol-based product to clean the hands. Alcohol-based hand rubs significantly reduce the number of germs on skin and are fast acting. Good hand hygiene is the single most effective procedure to prevent the spread of communicable disease in the school setting. An allowance for hand washing should be incorporated into the daily routine of all students in West Virginia public schools, especially before eating, after blowing the nose, coughing, or sneezing, after going to the bathroom and as deemed necessary by the school.

5.2. Students must be in compliance with the required immunization schedule as set forth by the WVDHHR State Health Officer. The WVDHHR State Health Officer, or his/her designee (local health officer) shall make the final determination in cases in which an authorized medical practitioner's written medical exemption is challenged by school personnel as inappropriate or invalid. The immunization record shall be entered and reviewed annually into the West Virginia Education Information System (WVEIS).

5.2.1. All children entering prekindergarten (Pre-k), kindergarten and a West Virginia public school for the first time must have immunizations and show proof upon enrollment as defined by W.Va. Code §16-3-4. All Pre-k students shall also meet requirements in

126CSR28 West Virginia Board of Education Policy 2525, West Virginia's Universal Access to a Quality Early Education System.

5.2.2. Students entering in grades six and nine must have adolescent immunizations, such as but not limited to, tetanus and diphtheria toxoids and acellular pertussis (Tdap) and Meningococcal conjugate (Menactra) vaccines, and show proof upon entrance or within twelve months of entrance as defined by the WVDHHR State Health Officer. The immunization record shall be entered and reviewed annually into the West Virginia Education Information System (WVEIS).

5.2.3. The intent of requiring grades six and nine to show proof of immunizations is not to prevent active participation in school unless warranted by the WVDHHR or the local medical director in response to a health or safety emergency situation.

5.3. Instruction on the principle modes by which communicable diseases, including, but not limited to, human immunodeficiency virus (HIV)/acquired immunodeficiency syndrome (AIDS) are prevented, spread and transmitted shall be taught to students as outlined in 126CSR44E West Virginia Board of Education Policy 2520.5, Health Content Standards and Objectives. An opportunity shall be afforded to the parent or guardian of a child subject to instruction in the prevention, transmission and spread of HIV/AIDS and other sexually transmitted diseases to examine the course curriculum requirements and materials to be used in such instruction. The parent or guardian may exempt such child from participation in such instruction by giving notice to that effect in writing to the school principal as set forth in W. Va. Code §18-2-9.

5.4. An educational inservice on the prevention, transmission and treatment of current communicable diseases shall include, but not limited to, human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS), shall be provided to all school personnel every two years by the county boards of education, as specified in W. Va. Code §18-2-9 and §18-5-15d.

§126-51-6. Disease Control Measures.

6.1. Distinctions will be made related to diseases that are communicable in the school setting versus those known not to be spread by casual contact e.g. AIDS, Hepatitis B, Hepatitis C and other like diseases.

6.2. Each reported case of disease known not to be spread by casual contact will be validated by a designated individual such as a school nurse (W. Va. §18A-5-1 and W. Va. §18-5-22).

6.3. The administrator or school nurse shall exclude from the school any pupil or pupils known to have or suspected of having any infectious disease known to be spread by casual contact and is considered to be a health threat to the school population. The superintendent has the authority to exclude a staff member from school when reliable evidence or information from a qualified source confirms him/her of having a potential

communicable disease that is known to be spread by any form of casual contact and is considered a health threat to the school population. Such a student or staff member shall be excluded in accordance with guidelines of American Academy of Pediatrics and WVDHHR unless his/her physician approves school attendance and the condition is no longer considered contagious. All reportable communicable diseases will be referred to the county health department, without disclosure of personally identifiable information, as set forth in West Virginia Bureau for Public Health Legislative Rule 64CSR7, Reportable Diseases, Events and Conditions. The county health department is able to provide reportable communicable disease guidance or go to <http://www.wvdhhr.org/idep/#Disease%20%20Reporting>.

6.4. Mandatory screening for communicable diseases that are known not to be spread by casual contact is not warranted as a condition for school entry or for employment or continued employment, nor is it legal based on W. Va. Code §16-3C-1. All screenings performed in the public school setting should be age appropriate deemed effective and necessary through evidence-based and scientific researched-based practice utilizing standard procedures and with the Protection of Pupil Rights Amendment (PPRA), 20 U.S.C. §1232h. W. Va. Code §18-5-22 allows county boards to provide proper medical and dental inspections for all students attending school and gives authority to take any other necessary actions to protect students from infectious diseases.

6.5. Irrespective of the disease presence, standard/universal precautions shall be used and adequate sanitation facilities will be available for handling blood or body fluids within the school setting or school buses. Blood and body fluids from any person in the school setting shall be treated with standard/universal precautions; no exception shall be made when handling blood and body fluids. School personnel will be trained in standard/universal precautions as set forth by the Occupational Safety and Health Administration recommendations and guidelines at <http://www.osha.gov/>.

§126-51-7. Confidentiality.

7.1. All persons privileged with any medical information that pertains to students or staff members shall be required to treat all proceedings, discussions and documents as confidential information. Before any medical information is shared with anyone in the school setting a "legitimate educational reason" or "health or safety emergency situation" must exist, all other releases of confidential medical and health information shall be released only with the consent of the parent/guardian, student if over 18, employee or their representative as outlined in 126CSR94, West Virginia Board of Education Policy 4350, Procedures for the Collection, Maintenance and Disclosure of Student Data, Family Educational Rights and Privacy Act of 1988 and Family Educational Rights and Privacy: Final Regulations. Part II, 34 CFR Part 99.

7.2. Information from health records is part of the educational record and should be shared with the child's parents/guardians and pass freely among the school and medical home/health care provider to enhance student health and prevent duplication of services, only after permission is obtained from the student's parent/guardian.

§126-51-8. Severability.

8.1. If any provision of this rule or the application thereof to any person or circumstance is held invalid, such invalidity shall not affect other provisions or applications of this rule.

FISCAL NOTE WORKSHEET
(Submit 4 Copies)

HD NO _____ DRAFT NO _____ BILL NO _____ RESOLUTION NO _____

SUBJECT Policy 2423 Communicable Disease Control FUND N/A

SOURCE OF REVENUE: GENERAL FUND SPECIAL OTHER (SPECIFY) N/A

COST OF ESTIMATE BASED ON: AN ORIGINAL ESTIMATE BUDGET BILL OTHER (SPECIFY) N/A

INCOME ESTIMATE BASED ON: AN ORIGINAL ESTIMATE BUDGET BILL OTHER (SPECIFY) N/A

SHOW OVER-ALL EFFECT IN ITEMS 1 AND 2 & GIVE EXPLANATION OF BREAKDOWN BY FISCAL YEAR INCLUDING LONG-RANGE EFFECT

EFFECT OF PROPOSAL	ANNUAL		FISCAL YEAR		
	INCREASE	DECREASE	CURRENT	NEXT	THEREAFTER
1. ESTIMATED TOTAL COST	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PERSONAL SERVICES CURRENT EXPENSES REPAIRS/ALTERATIONS EQUIPMENT OTHER	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2. ESTIMATED TOTAL REVENUES	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

3. EXPLANATION OF ABOVE ESTIMATES (INCLUDING LONG-RANGE EFFECT):

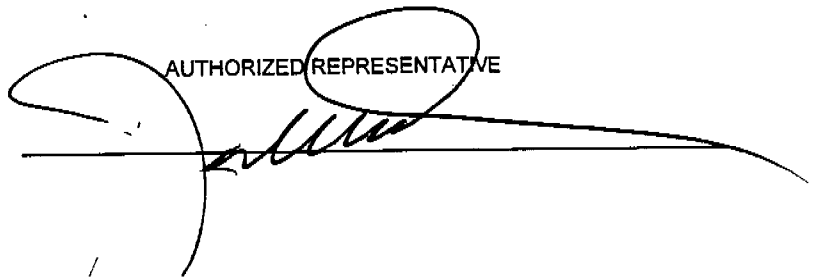
DATE

2/15/06

AGENCY

West Virginia Department of Education

AUTHORIZED REPRESENTATIVE



**Policy 2423 West Virginia Board of Education Regulations:
Communicable Disease Control
Comment Log
March 10, 2006 - April 10, 2006**

ACTION **TYPE**
 N: No Response - Negative
 N/A: Not Accepted + Positive
 A: Accepted o Neutral

Date	Individual/Organization	Comments	Action/Type	Rationale
§126-51-1. General.				
3/16/06	Rebecca Wise Monongalia County Schools	Entire policy is well written and is clear. It continues to be very general and broad which is sometimes an issue.	N	+

§126-51. - 2. Purpose.				

§126-51-3. Application.

§126-51-4. Definitions.

3/16/06	Rebecca Wise Monongalia County Schools	Clear and concise.	N
4/10/06	Jane Ishman Berkley County Schools	4.18-Add health into and all immunization to WVEIS entries. There are also health tags. Could assist when students change schools/counties.	A
			+
			0

§126-51-5. Disease Prevention Measures.

3/16/06	Debbie Covey Hancock County School	<p>I have a question about one section of the communicable disease: 5.2.2 and 5.2.3</p> <p>I am not sure what is meant by "students entering in grades six and nine must have immunizations" - what about the other grades? I check immunizations on every student that enters my schools. Could you please clarify this?</p>	A	0
3/17/06	Debbie Derico Upshur County Schools	<p>The section about 6th and 9th graders showing proof of immunizations (5.2.2) needs more clarification. It sounds like every 6th and 9th grader needs to show their immunization record before starting school in the fall. If we already have a copy of their record do they have to show it again within that school year and why? I may just be reading this wrong.</p>	A	0
3/24/06	MJ Rinard Berkeley County Schools	<p>I am unclear about what 5.2.2 means. Are we reviewing for boosters? Are we to be excluding students if boosters are not current? It says 'entering grades 6 and 9 must have imm....' are these students that are entering from out of state or just everybody progressing thru 6 and 9th grades? Just not sure what it means. MJ</p>	A	0

§126-51-5. Disease Prevention Measures.

4/06/06	Judy McCune Taylor County Schools	<p>Regarding the educational inservice that is part of the communicable disease control (2423) section 5.4 Does the State set the criteria or is it left up to each school district? Thank you for your assistance.</p>	A	0
4/08/06	Teresa Bayer Wood County Schools	<p>5.2.2 States "Students entering in grades six and nine must have immunizations and show proof upon entrance or within twelve months of entrance as defined by the WVDHHR State Health Officer The immunization record shall be entered and reviewed annually into the West Virginia Education Information System (WVEIS)."</p> <ul style="list-style-type: none"> • Is the intent to provide immunization education to parents/guardians? • Is the intent to create a mechanism to update school immunization records? • By review annually, does this mean to run a report that verifies each student record is documented on WVEIS? <p>5.2.3 States "The intent of requiring grades six and nine to show proof of immunizations is not to prevent active participation in school unless warranted by the WVDHHR or the local medical director."</p> <ul style="list-style-type: none"> • I understand what is Not the intent. What is the intent? <p>If the purpose of 5.2.2 and 5.2.3 is to provide immunization information and update school records, the following procedure may be more timely and cost effective.</p> <p>"Schools shall send to sixth and ninth grade parents/guardians immunization education and request documentation of immunization boosters."</p>	N	0
			N/A	0

§126-51-5. Disease Prevention Measures.

4/10/06	Jane Ishman Berkley County Schools	5.2.2-What about 30-day grace period as used to be with TB? 12 months is too long. Could happen between school years and student may get lost in the shuffle, switch schools, counties, states. All school nurses to check all 6 th and 9 th graders! Every year? Students are screened at kindergarten entry and all immunizations are reviewed. How is it suggested this to be done of all 6 th and 9 th ?	N/A	0
4/10/06	Yvonne Santin Wood County Schools	5.2.2. Should read: All children entering a West Virginia public school for the first time (pre-k through 12) must have immunizations and show proof upon enrollment as defined by the WVDHHR State Health Officer.	N/A	0
		5.2.2. and 5.2.3. Should be combined and read: Parents of students in grades six and nine will be sent information on immunizations needed that age group(s) and the importance of receiving such immunizations for disease prevention.	N/A	0

§126-51-6. Disease Control Measures.

4/08/06	Teresa Bayer Wood County Schools	6.5 Are OSHA standards currently used in training custodians and bus drivers? Are public schools held to OSHA standards?	N	O
4/10/06	Jane Ishman Berkeley county Schools	Is there a designated person to do OSHA universal precautions or up to each county?	N	O

§126-51-7. Confidentiality.

§126-51-8. Severability.

Please return comments to:
West Virginia Department of Education
Rebecca J. King, Coordinator
Office of Instructional Services
Building 6, Room 309
1900 Kanawha Boulevard, East
Charleston, WV 25301
FAX: (304) 558-3787
Email: rjking@access.k12.wv.us

Rebecca King

From: Nobody [nobody@wvde.state.wv.us]
Sent: Thursday, March 16, 2006 12:21 PM
To: fibanez@wvde.state.wv.us; rjking@access.k12.wv.us
Subject: Comment Received for Policy 2324 (2006-03-16 13:20:31)

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Comment Received for Policy 2324

####

Name: Rebecca Wise
Organization: Monongalia County Schools
Email: rbwise@access.k12.wv.us
Title: School Nurse
Address1: 1000 Mississippi Street
Address2:
City/State/Zip: Morgantown , WV 26501
Role: Professional Support
Posted: 2006-03-16 13:20:31
Posted from IP: 168.216.199.61

Comments for section 126-(5)-1 General

Entire policy is well written and is clear. It continues to be very general and broad which is sometimes an issue.

Comments for section 126-51-2 Purpose

Comments for section 126-51-3 Application

Comments for section 126-51-4 Definitions

Clear and concise.

Comments for section 126-51-5 Disease Prevention Measures

Comments for section 126-51-6 Disease Control Measures

Comments for section 126-51-7 Confidentiality

Comments for section 126-51-8 Severability

Mill Creek Intermediate School
 8785 Winchester Avenue
 Bunker Hill, W.Va. 25413
 Phone 304 - 229 - 4570
 Fax 304 - 229 - 4793



Fax

To: Rebecca King, RA From: Jane Blinn RA
 Fax: 304 558-8830 ³⁷⁸⁷ Pages: 24
 Phone: 304 558-8830 Date: 4/10/06
 Re: Comments to Policy 126 CBR 51
 CC:

- Urgent For Review Please Comment Please Reply As requested

Comments:

*Policy comment
 Commercial Disposal (2403)*

126CSR51

POLICY 2423: Communicable Disease Control

COMMENT PERIOD ENDS: April 10, 2006

COMMENT RESPONSE FORM

The following form is provided to assist those who choose to comment on Policy 2423: Communicable Disease Control. Additional sheets may be attached, if necessary.

Name: Paula Sharma, RN Organization: Berkeley Co. Schools

Title: School Nurse

Street Address: 8785 Mill Creek Intermediate School
Winchester Avenue

City: Bunker Hill State: WV Zip: 25413

Please check the box below that best describes your role.

- School System Superintendent
- School System Staff
- Parent/Family
- Principal
- Teacher
- Business/Industry
- Professional Support Staff
- Service Personnel
- Community Member

(School Nurse)

COMMENTS/SUGGESTIONS
§126-(5)-1. General.
§126-51-2. Purpose.

126CSR51

§126-51-3. Application.

§126-51-4. Definitions. 4.18- Add health info and immunizations to WEIS entries. Also add also health tags. Consider action when students change schools/schools

§126-51-5. Disease Prevention Measures. 5.2.2. What about 30 day grace period as used to have with 12 months is too long. Consider happen between school years + student may get "lost in shuffle", switch schools, counties, states etc. All school nurses to check each 6th + 9th graders? every year? Students are screened @ Kings town + all new entrants are reviewed. How is it suggested this be done year to this year?

§126-51-6. Disease Control Measures. - Is there a designated person to do OSHA universal precautions? or go to each county?

§126-51-7. Confidentiality.

126CSR51

§126-51-8. Severability.

Please direct all comments to:

Rebecca J. King
Office of Healthy Schools
West Virginia Department of Education
Capitol Building 6, Room 309
1900 Kanawha Boulevard, East
Charleston, West Virginia 25305-0330
E-Mail Address: rjking@access.k12.wv.us
Fax No.: (304) 558-8830

3187

Rebecca King

From: Debbie Covey [dcovey@access.k12.wv.us]
Sent: Thursday, March 16, 2006 1:16 PM
To: Rebecca King
Subject: Re: Policy 2423-Communicable Disease on Public Comment

*I have a question about one section of the communicable disease policy:
5.2.2. Students entering in grades six and nine must have immunizations and show proof upon entrance or within twelve months of entrance as defined by the WVDHHR State Health Officer. The immunization record shall be entered and reviewed annually into the West Virginia Education Information System (WVEIS).*

5.2.3. The intent of requiring grades six and nine to show proof of immunizations is not to prevent active participation in school unless warranted by the WVDHHR or the local medical director.

I am not sure what is meant by "students entering in grades six and nine must have immunizations" - what about the other grades? I check immunizations on every student that enters my schools.

Could you please clarify this?

— Original Message —

*From: "Rebecca King" <rjking@access.k12.wv.us>
To: <rjking@access.k12.wv.us>
Sent: Wednesday, March 15, 2006 5:20 PM
Subject: RE: Policy 2423-Communicable Disease on Public Comment*

>
> Dear School Nurses and Student Health Service Directors,
>
> The revised Policy 2423-Communicable Disease is online for public comment.
> The old policy was dated 1991. The two school nurses on the revision
> committee included India Hosch (Raleigh co.) and Brenda Isaac (Kanawha
> co.).
> Please go to <http://wvde.state.wv.us/policies/> to review the revised
policy
> on public comment.
>
> Thank you!
>

> *Rebecca King*

>

>

Rebecca King

From: Nobody [nobody@wvde.state.wv.us]
Sent: Friday, March 17, 2006 9:38 AM
To: fibanez@wvde.state.wv.us; rjking@access.k12.wv.us
Subject: Comment Received for Policy 2324 (2006-03-17 10:38:06)

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Comment Received for Policy 2324

####

*Name: Debbie Derico
Organization: Upshur Co. BOE
Email: cpderico@aol.com
Title: School Nurse
Address1: 102 Smithfield St.
Address2:
City/State/Zip: Busckhannon, WV 26201
Role: School System Staff
Posted: 2006-03-17 10:38:06
Posted from IP: 168.216.176.207*

Comments for section 126-(5)-1 General

Comments for section 126-51-2 Purpose

Comments for section 126-51-3 Application

Comments for section 126-51-4 Definitions

Comments for section 126-51-5 Disease Prevention Measures

The section about 6th and 9th graders showing proof of immunizations(5.2.2) needs more clarification. It sounds like every 6th and 9th grader needs to show their

immunization record before starting school in the fall. If we already have a copy of their record do they have to show it again within that school year and why? I may just be reading this wrong.

Comments for section 126-51-6 Disease Control Measures

Comments for section 126-51-7 Confidentiality

Comments for section 126-51-8 Severability

Rebecca King

From: jamccune@access.k12.wv.us
Sent: Thursday, April 06, 2006 5:38 AM
To: rjking@access.k12.wv.us
Subject: Educational Inservice for HIV & AIDS

Dear Rebecca,

Regarding the educationql inservice that is part of the communicable disease control (2423) section 5.4 Does the State set the criteria or is it left up to each school district?

Thank you for your assistance.

*Judy
McCune*

Rebecca King

From: Nobody [nobody@wvde.state.wv.us]
Sent: Saturday, April 08, 2006 10:00 AM
To: fibanez@wvde.state.wv.us; rjking@access.k12.wv.us
Subject: Comment Received for Policy 2324 (2006-04-08 11:00:27)

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Comment Received for Policy 2324

####

Name: Teresa Bayer
Organization: Wood County Schools
Email: tbayer@access.k12.wv.us
Title: School Nurse
Address1: 54 Bethel Place
Address2:
City/State/Zip: Washington, WV 26181
Role: Professional Support
Posted: 2006-04-08 11:00:27
Posted from IP: 24.158.88.233

Comments for section 126-(5)-1 General

Comments for section 126-51-2 Purpose

Comments for section 126-51-3 Application

Comments for section 126-51-4 Definitions

Comments for section 126-51-5 Disease Prevention Measures

5.2.2 States "Students entering in grades six and nine must have immunizations and show proof upon entrance or within twelve months of entrance as defined by the

WVDHHR State Health Officer The immunization record shall be entered and reviewed annually into the West Virginia Education Information System (WVEIS)."

- Is the intent to provide immunization education to parents/guardians?*
- Is the intent to create a mechanism to update school immunization records?*
- By review annually, does this mean to run a report that verifies each student record is documented on WVEIS?*

5.2.3 States "The intent of requiring grades six and nine to show proof of immunizations is not to prevent active participation in school unless warranted by the WVDHHR or the local medical director."

- I understand what is Not the intent. What Is the intent?*

If the purpose of 5.2.2 and 5.2.3 is to provide immunization information and update school records, the following procedure may be more timely and cost effective.

"Schools shall send to sixth and ninth grade parents/guardians immunization education and request documentation of immunization boosters."

Comments for section 126-51-6 Disease Control Measures

- 6.5*
- Are OSHA standards currently used in training custodians and bus drivers?*
 - Are public schools held to OSHA standards?*

Comments for section 126-51-7 Confidentiality

Comments for section 126-51-8 Severability

Rebecca King

From: Nobody [nobody@wvde.state.wv.us]
Sent: Monday, April 10, 2006 3:46 PM
To: fibanez@wvde.state.wv.us; rjking@access.k12.wv.us
Subject: Comment Received for Policy 2324 (2006-04-10 16:46:20)

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Comment Received for Policy 2324

####

Name: Yvonne Santin
Organization: Wood County Schools
Email: ysantin@access.k12.wv.s
Title: Director of Special Education
Address1: 1210 13th Street
Address2:
City/State/Zip: Parkersburg, WV 26101
Role: School System Staff
Posted: 2006-04-10 16:46:20
Posted from IP: 168.216.121.138

Comments for section 126-(5)-1 General

Comments for section 126-51-2 Purpose

Comments for section 126-51-3 Application

Comments for section 126-51-4 Definitions

Comments for section 126-51-5 Disease Prevention Measures

5.2.2. Should read: All children entering a West Virginia public school for the first time (pre-k through 12) must have immunizations and show proof upon enrollment as

defined by the WVDHHR State Health Officer.

Comments for section 126-51-6 Disease Control Measures

5.2.2. and 5.2.3. Should be combined and read: Parents of students in grades six and nine will be sent information on immunizations needed that age group(s) and the importance of receiving such immunizations for disease prevention.

Comments for section 126-51-7 Confidentiality

Comments for section 126-51-8 Severability

Rebecca King

From: Nobody [nobody@wvde.state.wv.us]
Sent: Friday, March 24, 2006 10:38 AM
To: fibanez@wvde.state.wv.us; rjking@access.k12.wv.us
Subject: Comment Received for Policy 2324 (2006-03-24 11:38:11)

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Comment Received for Policy 2324

####

*Name: MJ Rinard
Organization: Berkeley County Schools
Email: mrinard@access.k12.wv.us
Title: school nurse
Address1:
Address2: 404 Cedar Lane
City/State/Zip: Martinsburg, WV 25401
Role: Professional Support
Posted: 2006-03-24 11:38:11
Posted from IP: 168.216.234.113*

Comments for section 126-(5)-1 General

Comments for section 126-51-2 Purpose

Comments for section 126-51-3 Application

Comments for section 126-51-4 Definitions

Comments for section 126-51-5 Disease Prevention Measures

*I am unclear about what 5.2.2 means. Are we reviewing for boosters?
Are we to be excluding students if boosters are not current?*

It says 'entering grades 6 and 9 must have imm....'are these students that are entering from out of state or just everybody progressing thru 6 and 9th grades?

Just not sure what it means. MJ

Comments for section 126-51-6 Disease Control Measures

6.3 What reportable communicable diseases will we be referring to the HD? We are not actually diagnosing anything that is reportable.

I can see if we have clusters of diseases in a school we may need to consult but seeing 'All reportable communicable diseases will be referred to the Health Dept' in our school law gives me pause if it's implying it should be done by school personnel—it would be the diagnosing clinician's responsibility on a routine basis. I see on the WV Reportable Disease list 'Outbreaks or Clusters of any illness or condition' is listed and maybe that part should be in our law. A parents report to us that the child had the flu may not actually be the flu but a virus of some other sort.

Comments for section 126-51-7 Confidentiality

Comments for section 126-51-8 Severability
