

School District Tip Sheet Regarding Infection Control Measures

I. REVIEW EXISTING PLANS AND PROCEDURES

- Review district “Emergency Response Plan” and update with information from the Centers for Disease Control and Prevention (CDC) or the local/regional health department about infectious diseases.
(Readiness and Emergency Management for Schools Guide for Developing Emergency Plan for K-12: <http://rems.ed.gov/GuideK12.aspx>)
- Review district “Exposure Control Policy and Procedures.”
(DSSH template:
www.dshs.state.tx.us/idcu/health/infection_control/bloodborne_pathogens/plan/)

II. PREPARE FOR INFECTIOUS DISEASE

- Review latest CDC updates to information on infectious diseases.
- Contact local/regional health departments for information on infectious diseases.
- Implement stringent hand-hygiene practices ensuring there is soap and warm water available to students and staff. Use alcohol-based hand sanitizers if soap and water are not available.
(CDC Handwashing Information: <http://www.cdc.gov/handwashing/>)
- Implement cough and sneeze hygiene.
- Implement regular surface cleaning and disinfecting of desks, door knobs, bathrooms and other common areas in the school utilizing an Environmental Protection Agency (EPA) registered disinfectant for non-enveloped viruses. (See Environmental Cleaning and Disinfecting)
- Remind staff and students to get their influenza vaccine each year.
- Remind parents to keep their children at home when they are ill.
- Work with your local or regional health department to set up screening protocols or school nurse assessment guidelines for children who may be ill at school.

III. ENVIRONMENTAL CLEANING AND DISINFECTING

1. What’s the difference between cleaners, sanitizers and disinfectants?
 - **Cleaners or detergents** are products that are used to remove soil, dirt, dust, organic matter and microorganisms (like bacteria, viruses and fungi). Cleaners or detergents work by washing the surface to lift dirt and microorganisms off surfaces so they can be rinsed away with water. The same thing happens when you wash your hands with soap and water or when you wash dishes. Rinsing is an important part of the cleaning process.
 - **Sanitizers** are used to reduce microorganisms from surfaces but not totally get rid of them. Sanitizers reduce the microorganisms from surfaces to levels that are considered safe.
 - **Disinfectants** are chemical products that destroy or inactivate microorganisms. Disinfectants are regulated by the EPA.
2. Which disinfectants should be used?
 - Disinfectants are products readily available from grocery stores and other retail stores. Check the disinfectant product’s label on the back of the container. Most, if not all, disinfectant manufacturers will provide a list of microorganisms on their label that their product can destroy. Use an EPA-registered disinfectant with a label claim for a non-enveloped virus (e.g. norovirus, rotavirus, adenovirus), to disinfect environmental surfaces. (Selected EPA-registered Disinfectants: <http://www.epa.gov/oppad001/chemregindex.htm>)

3. How should cleaners and disinfectants be used?
 - Read the label first. Each cleaner and disinfectant has instructions on the label that tell you important facts:
 - How to apply the product to a surface.
 - How long you need to leave it on the surface to be effective (contact time).
 - If the surface needs to be cleaned first and/or rinsed after using.
 - If the disinfectant is safe for the surface.
 - Whether the product requires dilution with water before use.
 - If there are precautions you should take when applying the product, such as wearing gloves or aprons, or making sure you have good ventilation during application.
4. Facility Cleaning and Disinfection for Infection Control
 - Cleaning and disinfecting surfaces with EPA-registered disinfectants is effective at removing infectious organisms from the environment.
 - It is important to read the instruction labels on all cleaners to make sure they are used safely and appropriately.
 - Environmental cleaners and disinfectants should not be used to treat infections.
 - The EPA provides a list of EPA approved products.
<http://www.epa.gov/oppad001/chemregindex.htm>
 - Washing your hands regularly.
 - Keeping cuts and scrapes clean and covered with bandages or dressing until healed.
5. Surfaces to Clean and Disinfect
 - Focus on surfaces that touch people's bare skin each day and any surfaces that could come into contact with a person's body fluid. Examples include bathrooms, water fountains, desk tops, etc.
 - There is no evidence that spraying or fogging rooms or surfaces with disinfectants will prevent infections more effectively than the targeted approach of cleaning and disinfecting frequently touched surfaces and any surfaces that have been exposed to infectious matter.
6. Shared Equipment
 - Shared equipment that comes into direct skin contact should be disinfected after each use and allowed to dry. Equipment, such as helmets and protective gear, should be cleaned and disinfected according to equipment manufacturer guidelines.
7. Cleaning and Disinfecting Keyboards and other Difficult Surfaces
 - Many items such as computer keyboards or handheld electronic devices may be difficult to clean or disinfect or they could be damaged if they became wet. If these items are touched by many people during the course of the day, a cleanable cover/skin could be used on the item to allow for cleaning and disinfecting while protecting the item. Always check to see if the manufacturer has instructions for cleaning and disinfecting.
8. Is it disinfected?
 - Although in most situations you will not know if a surface has been disinfected, frequent cleaning and disinfecting will decrease the chance of any infectious disease being transmitted. If cleaning and disinfecting procedures are unknown, take the appropriate precautions, such as using barriers like a towel or clothing between your skin and the surface.

IV. IMPORTANT FACTS ABOUT EBOLA

- Ebola is a disease caused by the Ebola virus that can lead to severe and often fatal disease in humans and some animals that become infected.
- While Ebola is spreading rapidly in the West African countries of Liberia, Sierra Leone and Guinea, thus far only a very small number of cases of Ebola have been **diagnosed** in the United States. Additional cases may occur in the U.S, but the U.S. healthcare systems and public health's ability to address infectious diseases are far superior to those in the stricken West African countries.
- The following are symptoms of Ebola: a fever of 100.4°F or higher, severe headache, diarrhea, stomach pain or vomiting, and unexplained hemorrhage. These symptoms may appear anywhere from 2 to 21 days (8-10 days is the average) after coming in contact with a person who was infected with the virus.
- People must have symptoms in order to spread Ebola.
- Ebola is spread through direct contact with a person with Ebola. People only become contagious after they begin to have symptoms.
- Direct contact (through broken skin or mucous membranes in, for example, the eyes, nose, or mouth) includes contact with blood, secretions, or other bodily fluids, or exposure to contaminated objects, such as needles. Body fluids include saliva, mucus, vomit, feces, sweat, tears, breast milk, urine, and semen.
- Ebola can't be transmitted after symptoms resolve except via breast milk and semen (which can contain detectable virus for up to three months).
- The best way to prevent any infectious disease is to practice good hygiene. Wash your hands frequently using soap and warm water. If you cannot wash your hands, you can use an alcohol-based sanitizer. Avoid contact with blood and body fluids of any person, particularly someone who is sick.

At this time, there is no reason for schools to close, cancel classes, or cancel extracurricular activities due to risk of Ebola. Children who reside in a home where a family member is being monitored for Ebola should not be excluded from school attendance unless the student was directly exposed.

People who have been exposed to the disease are being identified and contacted by state and local public health officials. Public health officials will provide directions to any students who came into contact with someone infected with Ebola. If appropriate, based on exposure, the student may be asked to stay home. People exposed are being actively monitored for symptoms and fever.

Because no Ebola patients have been present at a Texas school, there is no reason to close or clean a building or bus beyond routine cleaning procedures for schools.

V. BE PREPARED

- Train all school staff on how to identify signs and symptoms of Ebola and how to avoid risk of exposure.
- Work with your local or regional health department to set up screening protocols or school nurse assessment guidelines for children who may be ill at school.
- Create an Assessment guideline to include:
 - A history to determine travel from West Africa or contact with a person with Ebola;
 - Symptoms of fever or other symptoms such as severe headaches, muscle pain, vomiting, diarrhea, stomach pain, or unexplained hemorrhage.
- Identify a private room, with a private bathroom if possible, where a student or staff member can be isolated away from the general population should the assessment warrant.

- Implement stringent hand-hygiene practices, ensuring there is soap and warm water available for use by students and staff. If soap and water are not available, utilize alcohol-based hand sanitizers.
- Inventory available supplies of Personal Protective Equipment (PPE).
 - Fluid resistant or impermeable gowns,
 - Gloves,
 - Shoe covers or shoe booties, and
 - Appropriate combination of the following:
 - Eye protection (face shield or goggles)
 - Facemasks (goggles and face shields must be worn with masks),
 - Other infection control supplies
 - Hand soap and hand sanitizer
 - EPA-registered disinfectant with a label claim for a non-enveloped virus (e.g. norovirus, rotavirus, adenovirus) to disinfect environmental surfaces.
- Conduct drills where staff members practice putting on/removing PPE to ensure they are familiar with the sequence.
 - Encourage personnel to observe each other while putting on/removing PPE. At minimum, ensure that PPE removal is supervised by a monitor to check for cross-contamination.
- Identify individual to be the first responder (school nurse, or person with some healthcare experience such as an EMT).
- Develop procedures to limit exposure of persons to the student or staff member's temporary isolation room if isolation is warranted.
- Create a monitoring tool to assess who goes in and out of the room where the student or staff member is isolated.
- Review environmental procedures for cleanup of spills of bodily fluids. If after consultation with the local or regional health department it is determined a student is suspected of having Ebola, the local or regional health department will provide additional instructions regarding any cleanup of bodily fluids
- Review plans for special handling of contaminated linens, supplies and equipment with guidance from your local or regional health department.
- Designate point of contact that will communicate with local health officials.

VI. RESPONDING TO EBOLA

- Ensure all parties, including staff and students, perform regular hand hygiene.
- Assess the student for possible Ebola with the assessment tool created:
 - If contact and travel history is negative or symptoms are negative, student is not at significant risk of Ebola.
 - If contact history is positive and symptoms exist, isolate the individual to a private room with a private bathroom, if possible.
 - Put on appropriate PPE, make appropriate notification and limit exposure to people in the vicinity.
 - Notify the local/regional health department and carefully document and provide them information about known exposure.