

Did you know that the Washington State Department of Health (DOH), in partnership with the Office of Superintendent of Public Instruction (OSPI), has a guide called the [Infectious Disease Control Guide for School Staff](#)? This guide is designed to assist schools in managing infectious diseases among students and staff.

Schools are required to notify the local health jurisdiction of cases, outbreaks, and suspected outbreaks of [notifiable conditions](#) as listed in [WAC 246-110](#). Additionally, these regulations also outline the responsibilities schools must take for disease control and prevention.

As a building administrator, this can be a lot to keep track of. Fortunately, the Registered Nurses (RN) in our district are ready to assist. At EPS, we also have [Board Policy 3414](#), which further addresses infectious disease management in our student population.

The **Infectious Disease Control Guide for School Staff** is not inclusive of all possible infectious diseases, but it covers those most often seen in PK-12 schools or among school-age individuals. It provides guidance on controlling the spread of diseases, safe cleaning and disinfecting practices, aerosol-generating procedures, respiratory protection programs, and ways to monitor for outbreaks.

As a district, we regularly receive reports of infectious diseases in our student population. While most are not reportable, occasionally, we receive reports of reportable infectious diseases. Thankfully most of these reports end up being false alarms, but sometimes they are real, and we must respond appropriately to ensure the health of our students and staff. If you encounter a reported or suspected case of an infectious disease in your school, here's what to expect:

1. **Report to the RN:** All incidences of infectious disease should be reported to the building RN as soon as possible. If your RN cannot be contacted, you can reach out to the Health Services Supervisor, Kari Johnson RN. Please be mindful of private health information and keep the identity of the individual as private as possible.
2. **Initial Investigation:** The initial investigation is always conducted by a RN to determine the validity of the reported case and figure out the next steps. Depending on the severity of the disease and suspected validity, the RN may move to the next step of notification immediately or continue the investigation while awaiting further information. Often, cases are found to have been reported in error, and no further action is needed. Once the validity of the reported case is confirmed or denied, the RN will proceed to the next step.
3. **Notification:** The results of all investigations must be reported to the affected building's administrator and the Health Services Supervisor. If the investigation reveals that the reported case is not valid, no further action is needed. If a case is confirmed, highly suspected, or unable to be confirmed despite the investigation, the RN will notify the building administrators and the Supervisor of Health Services of a possible case and move to the next step, reporting. The Health Services Supervisor will notify the director of Student Support Services, and if warranted the Deputy Superintendent as well.
4. **Reporting:** The RN will first determine if the disease is on the notifiable list. If it is, the RN will contact the Snohomish County Health Department's Communicable Disease Surveillance & Response team via email or telephone. If the disease is not reportable, or while waiting for a callback, the RN can move to the next step.

5. **Next Steps:** The RN will next consult the **Infectious Disease Control Guide for School Staff**, the Health Services Supervisor, and the building administrator to determine and communicate possible needs and actions to take. This step is very disease-specific and may vary between cases. If no further interventions are required, this will be communicated as well. It is important to remember that school staff who have information about an individual's diagnosis may only release that information to those responsible for protecting public health through disease control. This is why the RN may be limited in the information they can share, even with administrators, to protect the identity of the affected individual.
6. **Health Department Response:** Local health officers are tasked with taking appropriate actions to control or eliminate the spread of disease, as outlined in [WAC 246-110-20](#). They will communicate the plan with the RN. Typically, for most common disease, the plan includes notifying students and staff of a possible exposure. This communication could range from a single classroom to an all-school notification. If the plan involves actions such as canceling school activities, excluding infected or exposed individuals, and closing schools, they are required to discuss the ramifications of their actions with the school district superintendent. For any mandated actions from the local health jurisdiction, beyond a notification letter, the local health jurisdiction must provide the district's board of directors and superintendent with a written order directing them to act. Often, the local health jurisdiction only has strongly encouraged recommendations that are not mandated. In such cases, the Health Services Supervisor, in coordination with you, your RN, and other district leadership, will refer to the **Infectious Disease Control Guide for School Staff** for further guidance, there will be discussion regarding the highly recommended actions and decisions on further steps.

Remember, you are never alone in this journey. There is always time to stop and think about the next steps. If you have questions, you can always reach out to me, Kari Johnson RN. Being the first district in the nation to have had a case of COVID in the school setting, I know that our district always acts with integrity, with the number one goal being the health and safety of our students, staff, and general school community.