

Ebola Policy 2015

Please Note: This Policy is in place to keep everyone safe. All persons/children, entering the school compound will be subject to a temperature screening by trained staff members at the security gate. If the temperature is above 40 degree Celsius, a second test is done. If the temperature persists, that person/child, without exception, will not be permitted to enter the premises and the local Ebola team will be contacted immediately on the Ebola hotline at 4455. All persons/child with normal temperature will proceed to the hand washing station for proper sanitation before entering the building.

- In Liberia, Ebola remains a very rare disease that has until recently affected thousands of people. There have been no cases of Ebola transmission in schools yet since schools were closed during the height of the outbreak.
- Most situations regarding Ebola exposure that educators will face will pertain to perceived rather than any actual risk. Educators need to recognize such situations and address them in a timely and appropriate manner without overreaction.
- Ebola is spread only by direct contact with blood or body fluids of a person who has Ebola and shows symptoms of Ebola. People who are not showing symptoms of Ebola cannot spread the disease. Many other more common illnesses can present with these same symptoms, including influenza or other common viruses. These other infections are far more likely than Ebola virus to be the cause of illness, even in a person who recently arrived from a country with a large Ebola outbreak or a small outbreak that may be hard to control.
- It is key that we the educators proactively establish communication with the local public health department for timely exchange of information related to Ebola, and consult as needed.
- Our educators understand actions that may be taken by public health authorities in our jurisdiction for people exposed to Ebola. However, our staff will not take on the role and responsibilities of local public health authorities.
- Whether a student or staff person with possible recent (within 21 days) exposure to Ebola should attend school should be decided by local public health authorities.
- Our staff will and should prevent discrimination, and counter stigma, harassment, and bullying related to perception of Ebola risk.

People who are infected with Ebola but not showing symptoms **cannot** spread Ebola to other people. Only a person who is actually ill and showing symptoms poses a risk of infecting other people with Ebola. These

people will be actively monitored daily, so that immediate public health actions can be taken as soon as symptoms appear.

Ebola is a rare but severe and often deadly disease. Ebola is by direct contact (through broken skin or mucous membranes such as the eyes or mouth) with a sick person's blood or body fluids (including, but not limited to, urine, saliva, sweat, feces, and vomit). It is also spread by direct contact with objects (e.g., needles and syringes) that have been contaminated with infected blood or body fluids. Surfaces and objects that are not contaminated by blood or body fluids from a person sick with Ebola do not spread Ebola. Ebola is not spread through the air (i.e., by coughing or sneezing), by water, or cooked food.

Symptoms of Ebola infection include fever, severe headache, fatigue, muscle pain, vomiting, diarrhea, stomach pain, and unexplained bleeding or bruising. The longest period of time between exposure to Ebola and appearance of Ebola symptoms has been 21 days, although symptoms may appear as soon as 2 days after infection. Many other more common illnesses can present with these same symptoms, including Malaria. These other infections are far more likely than Ebola virus to be the cause of illness, even in a person who recently (within 21 days) arrived from an area with the Ebola outbreak.

Roles and Responsibilities of Educators and Public Health Authorities

Public health authorities play a key role in identifying a person's risk for Ebola exposure and advising on public health actions for individuals at risk of Ebola. Educators play a key role in addressing concerns and questions raised by students, parents, and staff about Ebola, and taking timely steps to respond to public health authorities' recommendations for school communities. Our staff understand the roles and responsibilities of public health authorities and consult with them on questions or issues related to Ebola. Our Staff/educators should not take on any of the roles and responsibilities of public health authorities.

Working in partnership, public health authorities our educators will proactively establish direct communication and clearly define each partner's roles and responsibilities.

Planning for Preventing or Responding to Ebola Infection at The Joy of Learning Montessori Institute, Inc. General Preparedness Actions for Educators

In their daily work with students and staff at school, our staff are aware of practical steps they can take if they need to respond to situations related to Ebola. As part of their preparedness for preventing or responding to possible Ebola infection in our school, our educators will consider the following practical steps:

- Review our school's emergency operations plans and revise them if necessary to address Ebola and other infectious diseases.
- Communicate with local public health authorities about their Ebola plan for the community.
- Engage teachers and teachers' aides in communicating about Ebola with students and parents including messages ensuring that children are not stigmatized based on race, country of origin, or any other reason.
- Teach students, teachers, and staff to take everyday preventive actions (such as staying home when sick, washing hands often, cleaning frequently touched surfaces and objects, and avoiding contact with sick people). Practicing good infection control will help prevent the spread of many infectious diseases.
- Encourage teachers, school staff, and parents to obtain annual immunization, which may reduce the number of adults and children coming to school with sicknesses.
- Train teachers, teachers' aides, and school nurses in early recognition of children with symptoms, such as fever, and how to determine if these symptoms may be occurring in a person who had a recent (within 21 days) possibility of exposure to Ebola. Symptoms that occur in a person who does not have a recent (within 21 days) possibility of exposure to Ebola are NOT related with Ebola, but with some other disease.

Continuity of Teaching and Learning

Our Staff will and should be mindful of students who may remain absent from school for an extended period of time while under direct active monitoring, or due to school dismissal, and provide opportunities for continuity of teaching and learning. Our curriculum is computerized so students won't have any gaps in their education. Parents will have the option to use our chromebooks at home and will communicate with that child via our web browser.

Situations that Do Not Pose a Risk of Ebola Transmission

Our educators will now be confronted with the challenge of mounting an effective response to the perceived risk of Ebola exposure or transmission when the actual risk of Ebola exposure or transmission did not exist.

Persons who have **NO identifiable risk of Ebola** do not pose any risk of spreading Ebola to others at school.

Also, household members of a person who has returned from deployment in a region with a large Ebola outbreak or a small outbreak that may be hard to control, does not have symptoms, and is undergoing direct active or active monitoring do not pose any risk to the community. Examples of situations posing **NO**

identifiable risk of Ebola include:

- having a household member who returned from Sierra Leone, Guinea or certain regions in Liberia and who has no symptoms of Ebola, even while that person is under direct active or active monitoring;
- contact with a person who is not showing symptoms of Ebola, even if that person was in contact with a person with Ebola;
- contact with a person with Ebola while that person did not yet have symptoms of Ebola;
- having traveled to a [country or region with a large Ebola outbreak or a small outbreak that may be hard to control](#) more than 21 days previously;
- having visited a country or region where Ebola cases occurred sporadically but where there is no widespread Ebola transmission (e.g., the United States or any other country except the [countries with a large Ebola outbreak or a small outbreak that may be hard to control](#)), and having no other exposures to Ebola; or
- having been born in a country, or being a part of a national origin community from a country where Ebola cases occurred, if that person was not in contact with a person with Ebola.

Responding to situations when a person with possible recent (within 21 days) Ebola exposure and an unknown risk assessment status comes to school

Ideally, persons with possible recent (within 21 days) Ebola exposure will be identified by a public health authority before they have attended school, and a public health authority will have assessed their risk of Ebola and recommended any public health actions to be taken. Public health authorities and educators should proactively establish a process for sharing information, in an appropriate and timely manner, about students and staff who are being monitored in their school community. However, it is possible that educators may find out from a source other than a public health authority about a student or staff member who may have been recently exposed to the Ebola virus (by traveling to a country with large Ebola outbreak or a small

outbreak that may be hard to control within the past 21 days, or by being in proximity to an Ebola patient with symptoms within the past 21 days), and for whom it is uncertain whether public health authorities have conducted an evaluation for Ebola exposure risk. In such situations, educators should consult public health authorities, so that they may conduct a risk assessment if necessary. Upon finding out about such a potentially exposed person at school, educators should determine if the person has symptoms suggestive of Ebola infection. Educators should learn if the person has symptoms suggestive of Ebola infection, while maintaining the individual's privacy.

- If the person does NOT have symptoms, there is no urgency to share full personal information with public health authorities, but educators should consult as soon as possible to determine the best course of action:
 - Contact public health authorities to discuss the situation in general terms without disclosing personally identifiable information from education records of the person with suspected Ebola exposure, so that public health authorities can determine if an individual risk assessment is needed;
 - If public health authorities determine that there is no need for an individual risk assessment and the person does not pose a risk to the school community, our educators will work to alleviate concerns by providing educational information about Ebola risks to the school staff and school community. Our educators are encouraged to prevent harassment and bullying by providing information to the school community, while taking all necessary steps to protect individual privacy;
 - If public health authorities determine that an individual risk assessment is needed and the person is a student under the age of 18, our staff will inform the parents/guardians to obtain their written consent to disclose personally identifiable information from education records of the student;
 - If the parent/guardian does not provide consent, then the school should ask the parent/guardian to contact public health authorities directly to obtain the risk assessment and inform the school of its outcome. Without the parent's consent, our school will not provide personally identifiable information from education records of the student under the age of 18 who does not show symptoms. However, refusal by the parent/guardian or the student to involve public health authorities in matters of possible public health concern should not prevent the school from contacting public health authorities to discuss the situation in general terms, without disclosing personally identifiable information from education records of the person with suspected Ebola exposure;
 - If the student is 18 years of age or older, or if the situation involves a teacher or staff member, our school would obtain consent directly from the person; and

- Wait for further guidance from public health authorities following an individual risk assessment before taking any further action.

Responding to situations when a person with symptoms possibly suggestive of Ebola comes to school

Children, particularly younger children, frequently show symptoms (e.g., fever, headache, or vomiting) that are common for many illnesses, such as influenza. Because Ebola is very rare, these other illnesses are far more likely than Ebola to be the cause of symptoms. A key consideration is that there must be both a combination of symptoms suggestive of Ebola **and** a possible Ebola exposure within 21 days prior to the onset of symptoms. Therefore, if a student or staff member shows symptoms suggestive of Ebola while at school, our educators should first determine if this person has also had possible recent (within 21 days) exposure to Ebola in the following ways:

- by the information from an individual risk assessment conducted by public health authorities and any subsequent and ongoing direct active or active monitoring,

or, if that information is not available at school,

- By asking if:
 - The person has traveled from a [country or region with a large Ebola outbreak or a small outbreak that may be hard to control](#) within the past 21 days; or
 - The person had a potential contact with a symptomatic Ebola-infected patient within the past 21 days.

No situations other than those described in detail above should be considered as possible exposure to Ebola. For a detailed description of situations that do not pose an actual risk for Ebola exposure, see the section on Situations that Do Not Pose a Risk of Ebola Transmission.

Of note, in this situation, when a person with symptoms suggestive of Ebola and possible Ebola exposure within 21 days prior to the onset of symptoms has attended school, educators may share immediately all necessary information with the public health authority (which may include personally identifiable information from education records) to facilitate timely investigation, because the health and safety emergency exception applies.

Description of the steps:

- We will take steps to rapidly separate the ill person from others
- Notify public health authorities of the situation and have them coordinate the transport of the ill person to medical facilities for a medical evaluation, if necessary; and
- Inform the parents/guardians of the situation and the need to conduct an individual risk assessment (if not done previously) and medical evaluation, if the ill person is a student/minor.

If a medical emergency (e.g., profuse vomiting) does not allow time for consultation with public health authorities, educators should contact 4455 and inform them of the emergency, recent travel of the person or potential contact with Ebola (if known), and then contact public health authorities and the parents/guardians as soon as possible. Educators should be prepared to provide all known relevant information regarding the ill person.

While waiting for the arrival of first responders and public health authorities, educators should immediately:

- Move all students, teachers, and staff who were not directly affected by possible contamination (e.g., by splashing vomit) away from the room where the ill person is located and from all areas with possible contamination;
- If other persons were directly affected by possible contamination (e.g., by splashing vomit), ensure that they remove any soiled clothing as soon as possible, without touching the face with soiled clothing or hands. Soiled clothing should be placed in a plastic bag;
- Ensure that anyone who was directly affected by possible contamination promptly washes their hands and any other exposed skin with soap and water, and that they are separated in a different room from other students and staff;
- Limit the number of staff to one or two who will stay in the room with the ill person;
- Ensure staff who are designated to stay with the ill person stay at least 3 feet away and avoid any contact with blood and body fluids (e.g., vomit, urine, saliva, feces);
- Keep a log of everyone who could have had contact with the ill person's blood or body fluids, in case this information is needed later; and
- Ensure that all areas of the school (or school bus, if the incident occurred on the bus) that are known to have been possibly contaminated with blood or body fluids are closed off from students and staff until cleaning and disinfection are completed, in consultation with public health authorities. School staff should not attempt to clean contaminated areas without consulting with public health authorities.

Public health authorities will assess the ill person's risk of Ebola exposure and evaluate his/her clinical condition to determine appropriate public health actions. They will also decide if laboratory testing is

necessary to rule out Ebola infection. Public health authorities will determine if the ill person should stay at home after the initial medical evaluation (e.g., if the person is sick with an infectious disease other than Ebola, such as influenza or Malaria) or if he or she should be isolated at a hospital if Ebola is suspected.

In rare situations, while the laboratory tests are pending to rule out Ebola (usually only for a day or two, although the actual timing depends on the person's stage of illness and on local circumstances), temporary school dismissal can be considered in consultation with public health authorities. Examples when temporary school dismissal may be appropriate include:

- When multiple/widespread area(s) in the school may have been contaminated with blood or body fluids (such as vomit, urine, feces);
- When it is impossible to determine where the contamination took place; or
- When an area essential for further school functioning (e.g., cafeteria) has been contaminated.

A laboratory test positive for Ebola means that Ebola infection is confirmed. Public health authorities will conduct a public health investigation, including tracing of all possibly exposed contacts. Educators should collaborate with public health authorities during the investigation and provide all requested information (e.g., lists of people who were present at school during the day) that may be helpful during the investigation. During the investigation, public health authorities may identify some people at school who are at risk of Ebola exposure (high risk, some risk, or low [but not zero] risk). Depending on individual level of exposure, public health authorities will decide if some of these people will need to undergo direct active monitoring (with or without exclusion from public places, group gatherings, workplaces, and school) or active monitoring.