

DEPARTMENT OF EDUCATION
Statutory Authority: 14 Delaware Code, Section 122(d) (14 Del.C. §122(d))
14 DE Admin. Code 805

805 The School Health Tuberculosis (TB) Control Program

PROPOSED

A. Type of Regulatory Action Required

Amendment to Existing Regulation

B. Synopsis of Subject Matter of the Regulation

The Secretary of Education intends to amend 14 **DE Admin. Code** 805 The School Health Tuberculosis (TB) Control Program. The amendments change the requirement for school staff, volunteers and new school enterers concerning the Mantoux tuberculin skin test. This regulation was advertised previously in the May 1, 2004 Volume 7 Issue 11, the July 1, 2004 Volume 8 Issue 1 and the September 1, 2004 Volume 8 Issue 3 *Register of Regulations*. In this version two additional definitions have been added and the definitions are all at the beginning of the regulation. Changes have been made to the last section (now 5.0) and the new title is Tuberculosis Status Verification and Follow Up. In addition changes have been made to the other sections for clarity and accuracy. A non-regulatory note was also added for 14 **DE Admin. Code** 930 Supportive Instruction (Homebound).

C. Impact Criteria

1. Will the regulation help improve student achievement as measured against state achievement standards? The amended regulation addresses TB testing not achievement standards.
2. Will the regulation help ensure that all students receive an equitable education? The amended regulation addresses TB testing not equity issues.
3. Will the regulation help to ensure that all students' health and safety are adequately protected? The amended regulation addresses TB testing which is a health and safety issue and the change from requiring a skin test to using a questionnaire is recommended by the Delaware Division of Public Health.
4. Will the regulation help to ensure that all students' legal rights are respected? The amended regulation addresses TB testing not students' legal rights.
5. Will the regulation preserve the necessary authority and flexibility of decision making at the local board and school level? The amended regulation will preserve the necessary authority and flexibility of decision making at the local board and school level.
6. Will the regulation place unnecessary reporting or administrative requirements or mandates upon decision makers at the local board and school levels? The amended regulation will add the process of administering the questionnaire but will substantially reduce the amount of actual testing.
7. Will the decision making authority and accountability for addressing the subject to be regulated be placed in the same entity? The decision making authority and accountability for addressing the subject to be regulated will remain in the same entity.
8. Will the regulation be consistent with and not an impediment to the implementation of other state educational policies, in particular to state educational policies addressing achievement in the core academic subjects of mathematics, science, language arts and social studies? The amended regulation will be consistent with and not an impediment to the implementation of other state educational policies, in particular to state educational policies addressing achievement in the core academic subjects of mathematics, science, language arts and social studies.
9. Is there a less burdensome method for addressing the purpose of the regulation? No, there is not a less burdensome method for addressing the purpose of the regulation than amending the regulation.
10. What is the cost to the State and to the local school boards of compliance with the regulation? There is no additional cost to the local school boards of compliance with the amended regulation.

805 The School Health Tuberculosis (TB) Control Program

~~1.0 School Employees, Substitutes, Student Teachers, and Contract Employees~~

~~All school employees, substitutes, student teachers, and contract employees (including bus drivers) shall receive the Mantoux tuberculin skin test or show proof of being tested in the past 12 months during the first 15 working days of employment.~~

1.1 Present employees, substitutes, and contract employees shall show proof of Mantoux tuberculin skin test results to the district designee by October 15, every fifth year of employment.

1.2 Student teachers need not be retested if they move from district to district as part of their student teaching assignments.

2.0 ~~Volunteers~~

~~Volunteers, those persons who give their time to help others for no monetary reward and who share the same air space with students and staff on a regularly scheduled basis, shall complete the Delaware Department of Education's Health Questionnaire for Volunteers in Public Schools prior to their assignment. Should the volunteer answer affirmatively to any of the questions, he/she must provide proof of a Mantoux tuberculin skin test in the past 12 months before beginning their assignment.~~

~~2.1 Volunteers shall complete the Delaware Department of Education's Health Questionnaire for Volunteers in Public Schools every fifth year.~~

~~2.1.1 The district designee(s) shall collect and monitor the volunteer questionnaires. These questionnaires will be stored in the School Nurse's office in a confidential manner.~~

3.0 Students

All new school enterers shall show proof of a Mantoux tuberculin skin test results within the past 12 months or follow the recommendations of the American Academy of Pediatrics (AAP). Health Care Providers must send documentation of the decisions. Multi-puncture skin tests will not be accepted. A school enterer is defined as any child between the ages of one year and 21 years entering or being admitted to a Delaware school district for the first time, including but not limited to, foreign exchange students, immigrants, students from other states and territories, and children entering from nonpublic schools.

3.1 School nurses shall record the results of the Mantoux tuberculin skin test in the School Health Record.

3.2 Tuberculin skin test requirements may be waived for children whose parent(s) or guardian(s) present a notarized document that tuberculin skin testing is against their religious beliefs.

4.0 Positive Reactors

4.1 Positive reactors (those currently identified and those with a history) need verification from a Health Care Provider or Division of Public Health indicating:

4.1.1 Skin test reaction recorded in millimeters.

4.1.2 Current disease status, i.e. contagious or non-contagious.

4.1.3 Current treatment, completion of preventive treatment for TB infection, or chemotherapy for TB disease.

4.1.4 Date when the individual may return to their school assignment without posing a risk to the school setting.

4.2 If documentation of the test is available, the known positive reactor need not have this tuberculin skin test but provide the above information related to disease status and treatment.

4.1.1 Verification from a Health Care Provider or Division of Public Health shall be required only once if treatment was completed successfully.

4.2 If documentation of the test is unavailable, the individual should be tested. If the individual refuses to be skin tested again, the individual shall provide from a Health Care Provider or the Division of Public Health information related to disease status and treatment.

4.3 Updated information regarding disease status and treatment shall be provided to the district designee by October 15 every fifth year if treatment was previously contraindicated, incomplete or unknown.

1 DE Reg. 1971 (6/1/98)

3 DE Reg. 440 (9/1/99)

1.0 Definitions:

"New School Enterer" means any child between the ages of one year and twenty one (21) years entering or being admitted to a Delaware public school for the first time, including but not limited to, foreign exchange students, immigrants, students from other states and territories, and children entering from nonpublic schools. For purposes of this regulation, "new school enterer" shall also include any child who is re-enrolled in a Delaware public school following travel or residency of one month in a location or facility identified by the Delaware Division of Public

Health as an area at risk for TB exposure.

“School Staff and Extended Services Personnel” means all persons hired as full or part time employees in a public school who are receiving compensation to work directly with students and staff. This includes, but is not limited to teachers, administrators, substitutes, contract employees, bus drivers and student teachers whether compensated or not.

“Tuberculosis Risk Assessment” means a formal assessment by a healthcare professional to determine possible tuberculosis exposure through the use of a health history or questionnaire.

“Verification” means a documented evaluation of the individual’s disease status.

“Volunteers” mean those persons who give their time to help others for no monetary reward and who share the same air space with public school students and staff on a regularly scheduled basis.

2.0 School Staff and Extended Services Personnel

2.1 School staff and extended services personnel shall provide the Mantoux tuberculin skin test results from a test administered within the past 12 months during the first 15 working days of employment.

2.1.1 Tuberculin skin test requirements may be waived for public school staff and extended services personnel who present a notarized statement that tuberculin skin testing is against their religious beliefs. In such cases, the individual shall complete the *Delaware Department of Education TB Health Questionnaire for School Employees* or provide, within two (2) weeks, verification from a licensed health care provider or the Division of Public Health that the individual does not pose a threat of transmitting tuberculosis to students or other staff.

2.1.1.1 If a school staff member or extended services person, who has received a waiver because of religious beliefs, answers affirmatively to any of the questions in the *Delaware Department of Education TB Health Questionnaire for School Employees* he/she shall provide, within two (2) weeks, verification from a licensed health care provider or the Division of Public Health that the individual does not pose a threat of transmitting tuberculosis to students or other staff.

2.1.2 Student teachers need not be retested if they move from district to district as part of their student teaching assignments.

2.2 Every fifth year, by October 15th, all public school staff and extended services personnel shall complete the *Delaware Department of Education TB Health Questionnaire for School Employees* or, within two (2) weeks, provide Mantoux tuberculin skin test results administered within the last twelve (12) months.

2.2.1 If a school staff member or extended services staff member answers affirmatively to any of the questions in the *Delaware Department of Education TB Health Questionnaire for School Employees* he/she shall provide, within two (2) weeks, verification from a licensed health care provider or the Division of Public Health that the individual does not pose a threat of transmitting tuberculosis to students or other staff.

2.3 All documentation related to the School Health Tuberculosis (TB) Control Program shall be retained in the same manner as other confidential personnel medical information.

3.0 Volunteers

3.1 Volunteers shall complete the *Delaware Department of Education’s TB Health Questionnaire for Volunteers in Public Schools* prior to their assignment and every fifth year thereafter.

3.1.1 If the volunteer answers affirmatively to any of the questions, he/ she shall provide, within two (2) weeks, verification from a licensed health care provider or the Division of Public Health that the individual does not pose a threat of transmitting tuberculosis to the students or staff.

3.2 Each public school nurse shall collect and monitor all documentation related to the School Health Tuberculosis (TB) Control Program and store them in the school nurse’s office in a confidential manner.

4.0 New School Enterers

4.1 New school enterers shall show proof of tuberculin screening results as described in 4.1.1 and 4.1.2 including either results from the Mantoux Tuberculin test or the results of a tuberculosis risk assessment.

4.1.1 Health care providers shall provide documentation of the Mantoux Tuberculin test results or the tuberculosis risk assessment results for the school. Multi-puncture skin test results will not be accepted.

4.1.2 If the new school enterer is in compliance with the other school entry health requirements, a school nurse who is trained in the use of the *Delaware Department of Education TB Risk Assessment Questionnaire for Students* may administer the questionnaire to the student’s parent(s), guardian(s) or Relative Caregiver or to a new school enterer who has reached the statutory age of majority (18).

4.1.2.1 If a student’s parent(s), guardian(s) or Relative Caregiver or a student 18 years or older answers affirmatively to any of the questions, he/she shall, within two (2) weeks, provide proof of Mantoux tuberculin skin test results or provide verification from a licensed health care provider or the Division of Public

Health that the student does not pose a threat of transmitting tuberculosis to staff or other students.

4.2 School nurses shall record and maintain documentation relative to the School Health Tuberculosis (TB) Control Program.

5.0 Tuberculosis Status Verification and Follow-up

5.1 Tuberculosis Status shall be determined through the use of a tuberculosis risk assessment, tuberculin skin test and other testing, which may include x-ray or sputum culture. Individuals who either refuse the tuberculin skin test or have positive reactions to the same, or give positive responses to a tuberculosis risk assessment shall provide verification from a licensed health care provider or the Division of Public Health that the individual does not pose a threat of transmitting tuberculosis to staff or other students.

5.1.1 Verification shall include Mantoux results recorded in millimeters (if test was administered), current disease status (i.e. contagious or non-contagious), current treatment (or completion of preventative treatment for TB) and date when the individual may return to their school assignment without posing a risk to the school setting.

5.1.2 Verification from a health care provider or Division of Public Health shall be required only once if treatment was completed successfully.

5.1.3 Updated information regarding disease status and treatment shall be provided to the public school by October 15 every fifth year if treatment was previously contraindicated, incomplete or unknown.

5.2 In the event an individual shows any signs or symptoms of active TB infection, he/she must be excluded from school until all required medical verification is received by the school.

1 DE Reg. 1971 (6/1/98)

3 DE Reg. 440 (9/1/99)

Non-regulatory note: See 14 **DE Admin. Code** 930 Supportive Instruction (Homebound)]

8 DE Reg. 822 (12/01/04)