

# School and Child Care Facility Guide to Communicable Disease Reporting in Bay County



1200 Washington Ave., Bay City, MI 48708  
(989) 895-4003

<http://www.baycounty-mi.gov/health/>



## **Table of Contents**

COMMUNICABLE DISEASE FACT SHEET	3
MICHIGAN COMMUNICABLE DISEASE RULES	4
WHY REPORT COMMUNICABLE DISEASES?	4
BAY COUNTY HEALTH DEPARTMENT ON DISEASE REPORTING	5
REPORTING GUIDELINES & REQUIREMENTS FOR SCHOOLS AND CHILDCARE FACILITIES	6
REQUIRED TO REPORT LIST	7-8
SUGGESTION FOR SCHOOLS TO HELP WITH REPORTING	9
IMPORTANT WEBSITES	9
WEEKLY REPORTING FORM	10

# Communicable Disease Fact Sheet

## What are communicable diseases?

Communicable diseases are spread from one person to another or from an animal to a person. The terms infectious, contagious, and transmissible are also used to describe communicable disease.

## How are communicable diseases spread?

The spread may occur by many different ways including:

- Direct physical contact with an infectious person
- Eat or drink contaminated foods or beverages
- Contact with infected body fluids and inanimate objects
- Airborne (inhalation)
- Being bitten by an infected insect or tick.

It may be difficult to know whether a person is contagious as they do not have to show symptoms to have the ability to spread the disease.

## How to prevent the spread of communicable diseases:

- Encourage frequent hand washing using soap and warm running water by staff and children at school for at least 20 seconds after using the bathroom, nose wiping, as well as before eating or handling food.
- Dry hands with either paper towels and turn off the faucet with the paper towel or the use of an air blow dryer.
- Teach students and teachers to cough or sneeze into tissue or their sleeve and not onto others, food, or food service utensils.
- Keep surfaces clean, neat, and dry by cleaning, sanitizing, and air drying. Immediately wash, rinse, and sanitize articles or surfaces that have been soiled with a discharge such as urine or nasal drainage. Spray or wipe, with a sanitizing solution, those things that cannot be submerged into solution, air dry do not towel dry.
- Wash and rinse all repeated use food service utensils, then sanitize them by submerging in a sanitizing solution or in water at 170 degree F for one minute. Air dry, do not towel dry.
- Develop a plan for school staff on how to handle illness and reduce spread. Prompt action by staff may prevent a serious outbreak of communicable disease.

# Michigan's Communicable Disease Rules

## Act No. 368 of the Public Acts of 1978 Schools and Communicable Disease Reporting

Physicians, clinical laboratories, **primary and secondary schools, childcare centers, and camps** are required to report the occurrence or suspected occurrences of any disease, condition or infection as identified in the Michigan Communicable Disease Rules. In addition, all other health care providers are authorized to report to local health authorities. Together, they play a key role in state and local efforts to control communicable diseases.

Communicable disease reports from health care providers, **schools, and childcare centers** are reviewed by the staff at the Bay County Health Department to look at trends of illnesses in the county.

## Why Report Communicable Diseases

**Schools are required to report communicable diseases for a number of reasons. The most common are as follows:**

1. **Identification of outbreaks and epidemics.** If an unusual number of cases occur, local health experts must investigate to identify the source and control the spread of the disease.
2. **Enabling preventive treatment and/or education to be provided.** Household contacts need to be identified for prophylaxis, treatment, and/or education about how to prevent the spread of some infections.
3. **Successful targeting of prevention programs, identification of care needs, and efficient use of scarce prevention resources.** Public and private health care funding is scarce. State and local public health authorities and health care providers must make difficult choices about what prevention and treatment services will be provided. Communicable disease data help to maximize the impact of these dollars.
4. **Evaluation of the success of long term control efforts.** Public health programs must have a means of assessing the continued success of control efforts for some diseases.
5. **Facilitation of epidemiologic research to uncover a preventable cause.** For some diseases of unknown etiology, reporting is needed to allow studies of the occurrence of the disease to help find the cause or modifiable risk increasing factors.
6. **Assistance with national and international disease surveillance and preparedness efforts.** For diseases that are unusual in Michigan, or for those that have the potential to be used as bioterrorism agents, we are part of a national network that the federal government depends on to determine whether national or international investigations are needed.
7. **Compliance with Michigan's public health laws.** All physicians, laboratories, and schools are required by law to report certain cases of communicable diseases.

**ACCURATE AND COMPLETE DISEASE REPORTING IS ESSENTIAL TO THE COMMUNITY'S HEALTH**

# Bay County Health Department on Disease Reporting

Michigan is served by a system of local public health departments that provide basic public health services, including communicable disease-related services, to all Michigan citizens and health care providers in all areas of the state. As such, they set their own priorities for how they allocate the resources available to them.

The goals of the Communicable Disease Division at the Bay County Health Department are to promptly investigate disease outbreaks and implement control measures to minimize further transmission of disease; monitor disease-reporting by physicians and laboratories in order to detect trends and to assess the public health impact of diseases; support communicable between public health agencies, private physicians, and hospital and occupational health infection control personnel, as an essential part of disease control efforts and prevention efforts; and to disseminate health education messages to the community and the media in order to enhance disease control and prevention efforts.

Bay County Health Department plays a key role in efforts to control communicable diseases. The public health system depends upon reports of disease to monitor community health and to provide the basis for preventive action.

Weekly communicable disease reports submitted by **schools and childcare facilities** are very important in helping the Bay County Health Department monitor the health of our community. It allows us to monitor flu-like illness, gastrointestinal illness, and strep throat which normally occur every year and also helps us to recognize higher than normal disease levels, which could indicate possible outbreaks. Individual reports of serious communicable diseases like pertussis or mumps allow the Bay County Health Department to alert those who may have been exposed to the disease, recommend vaccination and treatment as needed, and provide information to the public.

Remember:

- **Schools and childcare facilities** should designate a person and a back-up to collect communicable disease information daily and submit the reports every Friday by a specific time.
- **Schools and childcare facilities** should submit reports every week in session including vacation weeks, even if there are no diseases to report.

If you have any questions about reporting illnesses to the Bay County Health Department please use the contact information below. We look forward to receiving your future reports. Thank you for your contribution to the health of Bay County.

## Bay County Health Department

Phone: 989-895-4003 Fax: 989-895-2083

<http://www.baycounty-mi.gov/Health/CommunicableDisease.aspx>

# Reporting Guidelines and Requirements for Schools & Childcare Facilities

**Primary schools, secondary schools, camps, or child daycares** shall report to the local health department within 24 hours of suspecting any of the serious communicable diseases, or the unusual occurrence, outbreak or epidemic among those in attendance of any disease, infection, or condition (except for HIV and AIDS).

A report to the local health department of a condition in an individual shall contain all of the following information:

- The child's full legal name and parent/guardian's name if patient is a minor
- The child's current residential address, including street, city, village or township, county, and zip code
- The child's telephone number
- The child's date of birth or age, sex, race, and ethnic origin
- The name of the disease, infection, or condition reported
- The estimated date of the onset of the disease, infection, or condition, when applicable
- The identity of the reporting person including name, address, and phone number
- Any other information deemed to be related to the health of the public (e.g., other ill family members/contacts, food handler, group living situation, day care attendee/employee, etc.

## **Mail or Fax each Friday to the Bay County Health Department EVEN IF THERE ARE NO DISEASES TO REPORT**

1. Print or have a copy of the Weekly Reporting Form that can be found on the Bay County Health Department website at \_\_\_\_\_ (fill in the future) or attached below.
2. Fill out the appropriate information in Sections 1-5
  - a. Section 1
    - i. Week ending: this will always be the Friday date of the school week, even if school week ends on a different date (due to holidays, recesses, etc)
    - ii. School or Preschool: Name of your facility
    - iii. District: Fill in the name of the district your facility resides in
    - iv. Current School Enrollment: This number should reflect the total number of students currently enrolled in your school as of that week
  - b. Section 2
    - i. List all confirmed or suspected cases of communicable diseases including: measles, rubella, mumps, hepatitis, scarlet fever, strep throat, scabies, pertussis (whooping cough), chickenpox, Haemophilus Influenzae type b, encephalitis, and meningitis.
    - ii. Include disease, date first absent, child's first and last name, date of birth, grade, address/city/zip, phone number, and diagnosed by (doctor, parent, teacher).
  - c. Section 3

- i. Indicate by number only suspected or confirmed cases of influenza, gastrointestinal illness, and pediculosis (head lice)
  - d. Section 4
    - i. Report if there are no diseases to report or if school was closed due to disease by placing an “x” in the appropriate box
  - e. Section 5
    - i. Fill out who the report was submitted by, a telephone number to contact in case the health department has questions, and the date.
- 3. Add additional sheets as necessary

### **Aggregate Case Reporting**

Do not count the same child twice if he/she is absent for more than one day with the same illness. Enter “0” if there are no cases of the illnesses to report, otherwise:

### **Individual Disease Reporting**

The accuracy and completion of information in this section is very important. Please enter information carefully. In some cases it may be necessary for the health department to follow up on reported illnesses.

- A student needs to be entered only once for the duration of his/her illness unless the student presents with a new illness
- In addition to reporting on the form, call the Health Department IMMEDIATELY at 989-895-4003 to report any of the following serious/rare illnesses: measles, mumps, rubella, pertussis, Haemophilus influenza Type B, meningitis, encephalitis, hepatitis, tuberculosis, or any other serious communicable disease.
- Enter the “date 1<sup>st</sup> absent” which should reflect the first day of absence even if the student is absent for more than 1 day.

In addition to reporting a school closure on the form, call the Health Department IMMEDIATELY at 989-895-4003

**The following conditions are required to be reported within 24 hours, unless noted, to the local health department:**

Acquired Immune Deficiency Syndrome (AIDS)  
 Amebiasis  
 Anaplasmosis  
 Anthrax\*  
 Arboviral encephalitides, neuro-  
 and non-neuroinvasive, including:  
     West Nile  
 Babesiosis  
 Blastomycosis  
**Botulism\***  
 Brucellosis  
 Campylobacter enteritis  
 Chancroid

**Chickenpox (Varicella)**  
 Chlamydial disease, genital  
 Cholera  
 Coccidioidomycosis  
 Cryptosporidiosis  
 Cyclosporiasis  
 Dengue fever  
**Diphtheria**  
 Ehrlichiosis  
 Encephalitis, viral or unspecified  
**Escherichia coli, O157:H7** and all other shiga  
     toxin positive serotypes  
**Giardiasis**

Glanders  
 Gonorrhea  
 Guillain-Barré syndrome  
**Haemophilus influenza disease,**  
     Meningitis, epiglottitis, or other invasive  
 disease  
 Hantavirus pulmonary syndrome  
 Hemolytic-uremic syndrome (HUS)  
 Hepatitis viral:  
     Hepatitis A  
     Hepatitis B  
     Hepatitis C  
     Hepatitis D  
     Hepatitis E  
 Histoplasmosis  
 Human Immunodeficiency Virus (HIV)  
**Influenza** (report weekly aggregate counts)  
     Pediatric mortality, report individual cases  
     Novel influenza viruses, report individual  
 cases  
 Kawasaki disease  
 Legionellosis  
 Leprosy (Hansen’s disease)  
 Leptospirosis  
 Listeriosis  
 Lyme disease  
 Lymphogranuloma venereum  
 Malaria  
**Measles (Rubeola)**  
 Melioidosis  
**Meningitis: bacterial, viral, fungal, parasitic**  
**Meningococcal disease**  
     **Neisseria meningitides, sterile sites**  
**Mumps**  
 Smallpox\*  
 Monkeypox  
**Pertussis**

Plague  
 Poliomyelitis  
 Creutzfeldt-Jakob Disease (CJD)  
 Psittacosis  
 Q fever  
 Rabies, human  
 Rheumatic fever  
 Rickettsial disease, including:  
     Rocky Mountain spotted fever  
     Typhus  
**Rubella**  
**Salmonellosis**  
 Severe Acute Respiratory Disease (SARS)  
 Shigellosis  
**Staphylococcus aureus,** methicillin  
     Resistant (MRSA), outbreaks only  
 Staphylococcus aureus, vancomycin  
     Intermediate/resistant (VISA/VRSA)  
 Streptococcus pneumonia, sterile sites  
 Streptococcus pyogenes, group A  
     Sterile sites, including Streptococcal Toxic  
     Shock Syndrome (STSS)  
 Syphilis  
**Tetanus**  
 Toxic shock syndrome, non-Streptococcal  
 Trachoma  
 Trichinellosis  
 Tuberculosis  
 Tularemia\*  
 Typhoid fever  
 Vibriosis  
 Viral Hemorrhagic Fever\*  
 Yellow Fever  
 Yersiniosis  
 \*Category A bioterrorism agent, notify the  
 (989) 895-4003 immediately

Also report the unusual occurrence, outbreak, or epidemic of any disease or condition including healthcare-associated infections.

**This list MAY be updated annually; for the most recent version please refer to  
[www.michigan.gov/cdinfo](http://www.michigan.gov/cdinfo)**

**Exclusion from School**

When school officials, local health department staff or personnel reasonably suspect that a student has a communicable condition, they may exclude the student for a period of time



sufficient to obtain a determination by a physician or health officer as to the presence of the condition. A student may return to school when it is determined that he or she no longer represents a communicable disease risk to other students. Note: There are provisions in the public health code relating to the non-exclusion of those with HIV infections or AIDS. Check with your local health department or legal counsel if you need more information. For information about HIV privacy issues, see MCL 333.5131 (5) ( c ).

### **Immunizations- Michigan vaccination requirements**

The Michigan Department of Community Health and all local health departments in Michigan support immunization as guided by the federal Advisory Committee on Immunization Practices (ACIP). Compliance with current ACIP recommendations generally fulfills all minimum legal requirements for routine vaccination in Michigan.

## **Suggestion for Schools to Help with Reporting Diseases**

A detailed school answering machine message requesting specific information regarding a child's absence would be helpful for you to perform weekly disease reporting.

### **Answering Machine Message & Child Illness Inquiry**

The school answering machine message should include the following:

1. Symptoms of the illness (vomiting, diarrhea, fever, rash, etc.)
2. Report the type of illness if known and who identified the illness
3. Leave a telephone number where the parent/guardian can be reached or an address if there is no phone

### **Useful Websites**

Michigan Department of Community Health  
<http://www.michigan.gov/mdch>

MDCH Communicable Disease Information  
<http://www.michigan.gov/cdinfo>

MDCH Division of Immunization  
Information  
<http://www.michigan.gov/immunize>  
Michigan Disease Surveillance System  
<http://www.michigan.gov/mdss>

Centers for Disease Control and Prevention  
(CDC) <http://www.cdc.gov>

World Health Organization  
<http://www.who.int>

**The Privacy Rule in the Health Insurance Portability and Accountability Act of 1996 (HIPAA) allows for the disclosure of protected health information, without individual client or patient authorization, to public health authorities, who are legally authorized to receive such reports for the purpose of preventing or controlling the disease.**

**While every attempt has been made to accurately reflect legal duties defined by the Michigan communicable disease rules, this booklet should not be considered a substitute for private legal counsel, or as an alternative to understanding and following the rules this booklet strives to summarize.**

**Please consult the Michigan legislature website at <http://www.michiganlegislature.org> for more information.**

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

**MICHIGAN SCHOOL BUILDING WEEKLY REPORT OF COMMUNICABLE DISEASE TO LOCAL HEALTH DEPARTMENT**

According to Public Act 368, of 1978 as amended, the local health department shall be notified immediately of the occurrence of communicable disease (especially rash-like illnesses with fever). In addition to immediate notification by telephone, please include all occurrences on this form and mail to your local health department.

<b>1</b> WEEK ENDING:	SCHOOL OR PRESCHOOL:	DISTRICT:	CURRENT SCHOOL ENROLLMENT:
-----------------------	----------------------	-----------	----------------------------

**INSTRUCTIONS**

A: Record appropriate information in Sections 1, 2, 3, 4 & 5.  
 B: Simply fold, scotch tape, stamp and mail.  
 C: MAIL/FAX EACH FRIDAY to your local health department EVEN IF THERE ARE NO DISEASES TO REPORT.  
 NOTE: FAX EARLY IF DISEASE OF CONCERN.  
 D. Add additional sheets as necessary.

**2 LIST ALL CONFIRMED OR SUSPECTED CASES** of communicable diseases, including: Chickenpox, Measles, Rubella (German measles), Mumps, Hepatitis, Scarlet Fever, Strep Throat, Scabies, Pertussis (Whooping Cough), *Haemophilus influenzae* type b, Encephalitis, and Meningitis CASES HERE.

DISEASE	DATE FIRST ABSENT	CHILD'S NAME LAST FIRST	BIRTH DATE	GRADE	ADDRESS/CITY/ZIP	PHONE NUMBER(S)	DIAGNOSED BY (provide name if available) (Dr., parent, teacher, etc)

**3** Indicate here (by number only) suspected or confirmed cases of:

DISEASE	NUMBER OF CASES
Respiratory Illness*	
Gastrointestinal Illness <sup>1</sup>	
Pediculosis (Head Lice)	

\*Respiratory Illness (Influenza like): Any student with fever or pneumonia AND any of the following symptoms-sore throat, cough, generalized aching in the muscles of arms/legs/back.  
<sup>1</sup> Gastrointestinal Illness (Norovirus like): any student with vomiting and/or diarrhea.

**4** Place an X here if:

NO DISEASES TO REPORT

SCHOOL CLOSED DUE TO DISEASE

**5**

SUBMITTED BY: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_

DATE: \_\_\_\_\_