

# POLICIES AND PROCEDURES MANUAL

KEYSTONE COMMUNITY RESOURCES, INC.

KEYSTONE INDEPENDENT LIVING, INC.



**Policy Title:**  
**Staff Health**

**Chapter:**  
Serious communicable diseases

**Effective Date:**  
10/25/1999

**Revision Date:**

**Policy Number:**  
0-0-9

**Robert Fleese, President - CEO**

## SCOPE:

- Chapter 3800 – Child Residential and Day Treatment Facilities

## INTRODUCTION:

1. If a staff person or volunteer has a serious communicable disease that may be spread through casual contact, written authorization from a licensed physician, certified nurse practitioner or licensed physician's assistant is required for the person to be present at Keystone.
2. Written authorization from a licensed physician, certified nurse practitioner or licensed physician's assistant shall include a statement that the person will not pose a serious threat to the health of the children and specific instructions and precautions to be taken for the protection of the children.
3. The written instructions and precautions shall be followed.

## DISCUSSION: