

POLICY FAMILY	HEALTH AND SAFETY OF STUDENTS	644
<p data-bbox="256 262 316 294"><u>644.</u></p> <p data-bbox="175 331 397 493">School Attendance by Children with Acquired Immune Deficiency (AIDS)</p> <p data-bbox="170 730 402 928">Medical Guidelines Regarding Students Who Bleed in an Uncontrollable Fashion in a School Setting</p> <p data-bbox="203 1369 370 1432">Guidelines for Disclosure</p>	<p data-bbox="446 262 1453 325">Note: Most of the language of this policy has been directly adapted from the State Board of Education/Department of Public Health Policies on HIV/AIDS.</p> <ol data-bbox="495 373 1453 949" style="list-style-type: none"> <li data-bbox="495 373 1453 766">1. AIDS (Acquired Immune Deficiency Syndrome) and HIV (Human Immunodeficiency Virus) the virus that causes AIDS, are serious threats to the lives and health of young people. HIV can be transmitted through unprotected sexual intercourse, through blood-to-blood contact (such as the sharing of injection drug needles and syringes) and from an infected woman to her baby at or before birth. A large body of research has demonstrated that HIV is not transmitted through casual contact, such a in a school setting. Therefore, except in very rare cases (outlined below), there is no legitimate public health reason to exclude student with AIDS or HIV infection from attending school. Student with AIDS/HIV infection have the same right to attend classes or participate in school programs and activities as any other student. <li data-bbox="495 808 1453 949">2. A number of serious infectious diseases are spread by contact with human blood. Among these blood-borne infections are the Hepatitis B virus and HIV (the virus the causes AIDS). Consequently, students who bleed uncontrollably should not have routine contact with other individuals in school settings. <p data-bbox="544 997 1421 1060">As a public health measure, students ho exhibit the following conditions should be advised not to attend school until such time as these conditions are resolved:</p> <ol data-bbox="544 1102 1453 1390" style="list-style-type: none"> <li data-bbox="544 1102 1453 1165">a. if a student has weeping or bloody skin or mouth sores that cannot be successfully covered or controlled with medications. <li data-bbox="544 1207 1453 1312">b. if the student exhibits biting of an unusual frequency or severity that would be accompanied by actual transfer of blood <u>from the biter</u>, as might happen only from a student with chronically bloody gums or mouth. <li data-bbox="544 1354 1453 1390">c. if the student exhibits bloody diarrhea. <p data-bbox="544 1432 1453 1495">These conditions are grounds for the exclusion of <u>any student</u> from a school setting, regardless of whether she/he is known or suspected to harbor a blood-borne infection.</p> <ol data-bbox="495 1543 1453 1642" style="list-style-type: none"> <li data-bbox="495 1543 1453 1642">3. The student’s parent(s) or guardian(s)* are the gatekeepers of information relating to the student’s AIDS/HIV states. They are not obliged to disclose this information to school personnel. <p data-bbox="544 1690 1453 2005">A student who is diagnosed with AIDS or presents evidence of being immuno-compromised is at a greater risk of contracting infections. This means there may be good reason to inform the school nurse or school physician of a student’s AIDS diagnosis or HIV infection status. This student’s parent(s) or guardian(s)* would benefit from information from the school nurse or school physician about eh occurrence of threatening contagious diseases (such as chicken pox or influenza) when making a decision regarding school attendance. The school nurse or school physician may also need to attend to the particular needs of HIV-infected students regarding immunization schedules and medications.</p>	

Statutes Governing Disclosure

In consultation with the student's primary care physician, the student's parent(s) or guardian(s)* may decide to inform certain school personnel about the student's AIDS/HIV status, particularly the school nurse or school physician. If they so choose, the following guidelines are recommended:

- a. The student's parent(s) or guardian(s)* may inform the school nurse or school physician directly.
 - b. Alternatively, the student's parent(s) or guardian(s)* may request that their primary care physician make the disclosure. In this case, specific, informed, written consent of the student's parent(s) or guardian(s)* is required.
 - c. **Further disclosure of a student's HIV status by the school nurse or school physician to other school personnel requires the specific, informed, written consent of the student's parent(s) or guardian(s)*.**
4. As a general rule, a student's health records related to AIDS/HIV should be regarded as confidential. The Massachusetts General Laws, c.111, s.70F, prohibit health care providers, physicians and health care facilities (including school-based clinics) from disclosing HIV test results, or even the fact that a test has been performed, without the specific, informed, written consent of the person who has been tested. This statute prohibits testing persons for HIV antibodies without their permission, and protects against the nonconsensual release of medical records (including school health records) which contain such information.

These statutory requirements apply specifically to health care providers. However, case law in Massachusetts and other states leads to the conclusion that other school staff members beside health care providers may be liable for civil damages in the event of nonconsensual disclosure of information related to HIV status or AIDS diagnosis. In short, information about an individual's AIDS/HIV status should be treated as highly confidential, and released only with the specific, informed, written consent of the individual's parent(s) and guardian(s)*

*Under state public health statute M.G. c.112 s.12F minors may consent to their own dental care and medical testing, diagnosis and treatment in certain circumstances (including HIV infection). This law mandates confidentiality of medical information and records except when an attending physician or dentist reasonably believes that the condition of the minor is so serious that the minor's life or limb is endangered. Accordingly, if an adolescent student has sought HIV antibody testing independent of parental consent, that student has the right to keep this information confidential, and any disclosure of this information would require the student's specific, informed, written consent.

Universal Precautions For School Settings

Universal precautions refer to the usual and ordinary steps **all** school staff need to take in order to reduce their risk of infection with HIV, the virus that causes AIDS, as well as all other blood-borne organisms (such as Hepatitis B virus).

They are **universal** because they refer to steps that need to be taken in all cases, not only when a staff member or student is known to be HIV-infected.

They are **precautions** because they require foresight and planning, and should be integrated into existing safety guidelines.

Appropriate equipment (mops, buckets, bleach, hot water, hand soap, disposable towels and latex gloves) must be readily available to staff members who are responsible for the clean-up of body fluid spills.

a. Treat human blood with caution.

b. Clean up blood spills promptly.

c. Inspect the intactness of skin on all exposed body parts, especially the hands. Cover any and all open cuts or broken skin, or ask another staff member to do the clean-up. Latex gloves contribute an added measure of protection, but are not essential if skin is intact.

d. Clean up blood spills with the solution of one part household bleach to ten parts water, pouring the solution around the periphery of the spill. Disinfect mops, buckets and other cleaning equipment with fresh bleach solution.

e. **Always** wash hand after any contact with the body fluids. This should be done immediately in order to avoid contaminating other surfaces or parts of the body (be especially careful not to touch your eyes before washing up.) Soap and water will kill HIV.

f. Clean up other body fluid spills (urine, vomitus, feces), unless grossly blood contaminated, in the usual manner. They do not pose a significant risk of HIV infection.

THIS POLICY MAY BE AMENDED WITH THE NEW RELEVANT INFORMATION FROM THE MEDICAL COMMUNITY.

Adopted
1/22/86

Revised
1/29/92