

## **Personnel/Students**

### **Students/Staff with HIV, ARC (AIDS Related Complex) or AIDS**

The District shall strive to protect the safety and health of children and youth in its care, as well as their families, District employees, and the general public. Staff members shall cooperate with public health authorities to promote these goals.

The evidence is overwhelming that the risk of transmitting human immunodeficiency virus (HIV) is extremely low in school settings when current guidelines are followed. The presence of a person living with HIV infection or diagnosed with acquired immune deficiency syndrome (AIDS) poses no significant risk to others in school, day care, or school athletic settings.

The anonymity of individuals with HIV infection or AIDS is protected by law. Moreover, individuals with HIV infection or AIDS are protected from discrimination by both federal and state laws. Neither attendance at school nor employment may be denied to an individual with HIV infection or AIDS. It is the policy of the District that no student or staff member with HIV infection or AIDS may be prohibited from attending school/employment unless there is an immediate risk of injury or harm to the individual or to others.

Because the diagnosis of HIV infection or AIDS is a confidential matter between the individual student or staff member and his or her physician, the District may be unaware of the diagnosis. Consequently, the Board of Education has adopted a policy of "universal precautions" which protects all students and staff from contact with blood and body fluids of others. These precautions are enumerated in the Bloodborne Pathogen policy.

(cf. 4147.1/4247.1 Bloodborne Pathogens)

Legal Reference:                      Connecticut General Statutes  
   10-19b AIDS education  
   10-76(d)(15) Duties and powers of boards of education to provide  
   special education programs and services 10-154a Professional  
   communications between teacher or nurse and student  
   10-207 Duties of medical advisors  
   10-209 Records not to be public  
   10-210 Notice of disease to be given parent or guardian  
   19a-221 Quarantine of certain persons  
   19a-581-585 AIDS testing and medical information

Policy adopted:                      June 4, 2019

NEWTOWN PUBLIC SCHOOLS  
Newtown, Connecticut

## **Students/Personnel**

### **Students/Staff with HIV, ARC (AIDS Related Complex) or AIDS**

The Newtown Board of Education adopts the following protocols for educating students known to have AIDS/HIV infection and for ensuring a safe and healthy school environment for all students.

1. A child with AIDS/HIV will be allowed to attend school in a(regular) classroom setting with the approval of the child's physician and will be considered eligible for all rights, privileges, and services provided by law and local Board of Education policy.
2. With the written permission of the parent/guardian, the school nurse will function as (a) the liaison with the child's physician and the school medical advisor, (b) the child's advocate in the school, and (c) the coordinator of services provided by other staff.
3. The school will respect the right to privacy of the child and maintain strict confidentiality of any records containing health information. Therefore knowledge that a child has AIDS/HIV will be confined to those persons authorized in writing by the parent/guardian and with a direct need to know. Those persons will be provided with appropriate information concerning the child's needs and confidentiality requirements.
4. Based upon individual circumstances, special programming may be warranted. Special education will be provided if determined to be necessary by the PPT (planning and placement team).
5. Under certain circumstances a child with AIDS/HIV might pose a risk of transmission to others. If any such circumstances exist, the school medical advisor, in consultation with the school nurse and the child's physician, must determine whether a risk of transmission exists. If it is determined that a risk exists, the student shall be educated in a location that will not place others at risk.
  - a) A child with AIDS/HIV may be temporarily removed from the classroom until either an appropriate school program adjustment can be made, an appropriate alternative education program can be established, or the medical advisor determines that the risk has abated and the child can return to the classroom.
  - b) Removal from the classroom will not be construed as the only response to reduce risk of transmission. The school district will be flexible in its response and attempt to use the least restrictive means to accommodate the child's needs.
  - c) In any case of temporary removal of the student from the school setting, State regulations and local Board of Education policy regarding homebound instruction must apply.
  - d) The removal of a child with AIDS/HIV from normal school attendance will be reviewed by the school medical advisor and school nurse in consultation with the student's physician and guardian/guardian periodically to determine whether the condition precipitating the removal has changed.

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6. A child with AIDS/HIV, as with any other immuno-deficient child, may need to be removed from the classroom for his/her protection when cases of measles or chicken pox are occurring in the school population. This decision will be made by the child's physician and parent/guardian in consultation with the school nurse and/or the school medical advisor.
7. Routine and standard procedures will be used to clean up after any child has an accident or injury at school. Universal precautions will be followed. All staff will be trained to use such procedures. Blood or other body fluids emanating from any child, including ones known to have a chronic infectious disease, should be treated cautiously. Gloves should be worn when cleaning up blood spills. These spills should be disinfected with either bleach or another disinfectant, and persons coming in contact with them should wash their hands afterwards. Blood soaked items should be placed in leak proof bags for washing or further disposition. Similar procedures are recommended for dealing with vomit and fecal or urinary incontinence in any child. Hand washing after contact with a school child is not routinely recommended unless physical contact has been made with the child's blood or body fluids, including saliva. Staff who have had significant exposure to body fluids or blood shall be offered Hepatitis B vaccinations according to OSHA regulations.
8. Ongoing education about AIDS will be provided to all interested persons with the help offered by State and local health departments.