

AIDS (ACQUIRED IMMUNE DEFICIENCY SYNDROME)

The guidelines and procedures outlined herein apply to all students and staff of the Granby Public Schools. These guidelines and procedures will remain in effect until such time as it is necessary to amend them to reflect new medical information or state policies as such become available.

Epidemiologic studies show that AIDS is transmitted via sexual contact or blood-to-blood contact. This fact is also observed with medical personnel who directly care for and are exposed to AIDS cases. Since there is no evidence of casual transmission by sitting near, living in the same household, or playing together with an individual with AIDS, the following guidelines shall be implemented in the Granby Public Schools:

I. Student Guidelines and Procedures

- A. All children diagnosed as having AIDS or with clinical evidence of infection with the AIDS-associated virus (HIV) and receiving medical attention are able to attend regular classes. However,
 - 1. If a child has cutaneous (skin) eruptions or weeping lesions that cannot be covered, he/she should not be in school.
 - 2. If the child exhibits inappropriate behavior, which increases the likelihood of transmission (i.e., biting or frequent incontinence), he/she should not be in school.
- B. Children diagnosed as having AIDS or with clinical evidence of infection with the AIDS-associated virus (HIV), who are too ill to attend school, should have an appropriate alternative educational plan.
- C. Siblings of children diagnosed as having AIDS or with clinical evidence of infection with the AIDS-associated virus (HIV) are able to attend school without any restrictions.
- D. The personal physician of a child diagnosed as having AIDS or with clinical evidence of infection with the AIDS-associated virus (HIV) is the primary manager. Management includes acting as the “*gate keeper*” for the child’s attendance at school in accordance with the policy outlined above.
 - 1. The student’s personal physician, after consultation with the family, is responsible for reporting the case to the Massachusetts Department of Public Health’s Division of

Communicable Diseases. The Superintendent will be notified and will provide assistance in identifying those educational or health care agents with an absolute need to be informed about the case.

2. Only persons with an absolute need to know should have medical knowledge of a particular student's case. In individual situations, the Superintendent may notify one or more of the following:
 - a. Principal
 - b. School Nurse
 - c. Student's Teacher
 3. Notification should be made through a process that would maximally ensure patient confidentiality. Ideally, this process should be direct person-to-person contact.
- E. If school authorities are aware that a child diagnosed as having AIDS or with clinical evidence of infection with the AIDS-associated virus (HIV) has evidence of conditions described in A. 1 or 2 above, the school authorities will call on the child's personal physician to determine if class attendance is in compliance with the school policy.
- F. If school authorities, and the child's personal physician, are in conflict, the case should be referred to the Department of Public Health, for review by an approved physician who would determine the permissibility of attendance.
- G. Since the child diagnosed as having AIDS or with clinical evidence of infection with the AIDS-associated virus (HIV) has a somewhat greater risk of acquiring infections in the school setting, the child should be excluded from school if there is an outbreak of a threatening communicable disease such as chicken pox or measles, until he/she is properly treated (possible with hyperimmune gamma globulin) and/or the outbreak is no longer a threat to the child.
- H. HIV Screening is a blood test for detecting the presence of antibodies to the HIV virus. Antibodies are substances produced by the white blood cells which help fight infections caused by viruses or bacteria. Testing for HIV antibodies is not recommended for any purposes other than to assist the child's personal physician in making a highly selected set of clinical decisions. Results of HIV screening tests are confidential and should not be reported to schools.

- I. Blood or any other body fluids including vomitus and fecal or urinary products of any child should be treated cautiously. It is recommended that gloves be worn when cleaning up any body fluids.
 1. These spills should be cleaned-up with bleach (one part bleach to ten parts water) or another disinfectant, by pouring the solution around the perimeter of the spill.
 2. All disposable materials, including gloves, should be discarded in a plastic bag. The mop should also be disinfected with the bleach solution described above.
 3. Persons involved in the clean-up should wash their hands afterwards.
 - J. In-service programs for school nurses and other appropriate staff will be conducted as required and as new information becomes available.
- II. Employee guidelines and procedures
- A. Statement of Purpose and Scope

This section establishes the policy of the Granby Public Schools for dealing with employees who have AIDS. Its purpose is the protection of the right of the employees who have AIDS to continue employment. The Granby Public Schools also recognizes **its** obligation as an employer for all employees and for the public at large to provide an environment where employees and students do not have fears for their health and safety.

The policy and procedures are applicable to all employees of the Granby Public Schools as well as to all managerial staff.
 - B. Employee Policy

The Granby Public Schools recognize that employees with AIDS may wish to continue work. As long as employees are able to meet acceptable performance standards, and medical evidence indicates that their condition is not a threat to themselves or to others, employees shall be assured of continued employment. Federal and State laws also mandate, pursuant to the laws protecting disabled individuals, that such individuals may not be discriminated against on the basis of their handicap, and that, if it becomes necessary, reasonable accommodations will be made to enable qualified individuals to continue to work.

Revised February 7, 2005

Adopted February 2, 2004