

V. Students

(formerly #5145)

A. Administrative Policies

5. HIV Infected Students

- I. The Narragansett School Committee recognizes that students who are infected with the Human Immunodeficiency Virus (HIV), at any stage of infection, have the right to a free and appropriate public education in the Narragansett Schools. The School Committee also recognizes its responsibility to protect the health and safety of the entire school community. To accommodate the best interests of students with HIV infection, as well as provide for the health and safety of other students and employees, the School Committee directs the administration to establish and implement this policy.
- II. PURPOSE: The purpose in establishing a policy concerning Human Immunodeficiency Virus (HIV) infected students is to:
- A. Protect against the transmission of HIV from infected students to other students or employees.
 - B. Protect the health and well-being of the infected person as well as to enable that person to take part in normal school activities with a minimum of disruption.
 - C. Inform students, parents, teachers, school employees, and members of the community about safe practices regarding HIV transmission and the school's HIV policy.
 - D. Provide a basis for the school committee, superintendent, principals, teachers, nurses and physicians, school employees and students to establish necessary preventive measures, and to inform the public about these measures while still maintaining the rights of confidentiality of an infected individual, should any exist within the school district.
 - E. Utilize the OSHA Bloodborne Pathogens Policy and "*Guidelines for Prevention and Transmission of Human Immunodeficiency Virus and Hepatitis B Virus to Health-Care and Public-Safety Workers*" (better known as the "Universal Precautions" Policy) in the implementation of this policy.
- III. DEFINITION OF HIV INFECTION: HIV is an acronym for the Human Immunodeficiency Virus. HIV is the virus which causes AIDS, Acquired Immune Deficiency Syndrome. An individual is HIV infected if he/she tests positive on an ELISA test for the presence of HIV antibodies in the blood and is confirmed by a Western Blot (or other medically recognized) test, performed in a qualified medical laboratory. Infected people are described as being HIV positive.

V.A.5. HIV Infected Students (continued)

A person may be infected but show no symptom of illness. People at this early stage of the disease are described as “asymptomatic”. Asymptomatic people feel well and are able to work or attend school without limitation.

At a later stage of the disease, the person may exhibit some symptoms of AIDS. Persons with symptoms are described as “symptomatic”. Symptomatic people may have a health limitation, not unlike any other disease, which periodically affects one’s ability to work or to attend school.

Both symptomatic and asymptomatic persons carry the virus. However, they cannot transmit HIV through classroom contact with other students or employees. (See section IV for Routes of Transmission).

IV. ROUTES OF TRANSMISSION: HIV is transmitted from an HIV infected person to a non-HIV infected person in the following ways:

- A. Sexual activity.
- B. Needle sharing for tattooing, ear or body piercing or to inject drugs, including steroids.
- C. Direct infusion from blood or blood products.
- D. Biting, scratching or other injurious behavior.
- E. During pregnancy, in the birth process, or after birth from breast milk.

HIV cannot be spread by casual contact (e.g. sitting together, sneezing or coughing on each other, or eating together). Both Rhode Island Law (G.L. 23-6-22) and the Americans with Disabilities Act of 1990 (P.L. 101-336) expressly prohibit discrimination against individuals who are infected with, or who are perceived to be infected with, HIV. Being HIV positive is not grounds for dismissal from enrollment in school. However, if an HIV infected person demonstrates behavior which puts another at risk for becoming infected with HIV (see Routes of Transmission listed previously), then that behavior may lead to an alternative educational placement. The school physician shall participate in this risk assessment.

V. REPORTING HIV STATUS: When a student has tested positive for HIV, it is **optional** for that person to notify the Superintendent of Schools. Notification of an individual’s positive HIV status alone does not justify limiting that person’s involvement in the school. Informed individuals will be subject to the requirements of the Rhode Island General Laws 23-6-17 and 5-37.3-7 in the Confidentiality of Health Care Information Act, as well as any and all other relevant federal and state laws and regulations relating to the confidentiality of Health Care Information Act as well as any and all other relevant federal and state laws and regulations relating to the confidentiality of health care information. HIV related information cannot be transferred or released except as allowed by Rhode Island General Laws 23-6-17.

V.A.5. HIV Infected Students (continued)

VI. CONFIDENTIALITY OF STUDENT HIV STATUS: Information concerning the identity of HIV positive students must be kept confidential in accordance with Rhode Island General Laws 23-6-17 and 23-6-18. Any written or electronic records containing this information should be kept in a locked file in the Superintendent's Office and accessible only to those who have received written permission from the infected person, or, in the case of students under the age of 18, the written permission of the parent or guardian (FERPA notice). All school department employees and/or students who receive this information are bound by state and federal confidentiality laws.

VII. PERSONS WHO MAY NEED TO KNOW: Persons in the school system who may need to know the identity of an HIV positive student may include:

- A. The certified school nurse-teacher and school physician, especially as liaison with the infected person's personal physician (in order to monitor the student's health status and to help coordinate medical care).
- B. Certain other employees of the school department.
- C. The principal of the student.

The decision to inform personnel should be made by the Superintendent of Schools along with the infected student and parent or guardian and, with a signed release of information, in consultation with the infected person's physician.

VIII. DISSEMINATION: This policy should be disseminated annually through a minimum of the following methods:

- A. Inclusion in a staff in-service training program for all members of the school community including professional and support staff, coaches, bus personnel, building maintenance, and all others.
- B. Posting in a conspicuous place in each school and school administration building.
- C. Inclusion in school committee, parent, and student handbooks.
- D. Posting in all faculty rooms.
- E. Dissemination to all officials of collective bargaining units.
- F. Dissemination and in-service to meet the needs of those parents whose language is other than English.

IX. RIGHT OF APPEAL: This policy shall provide the student and/or parent/guardian with the opportunity to seek amendment to any records, written or electronic regarding his/her own HIV status. This does not preclude the use of any other remedy.

V.A.5. HIV Infected Students (continued)

- X. SCHOOL DECISION AUTHORITY: The Superintendent of Schools, as chief personnel officer, is responsible for ensuring that the purposes of this policy are implemented fully within the guidelines provided by both the Rhode Island and federal laws.
- XI. IMPLEMENTATION: This policy should be implemented in conjunction with an annual review of Universal Precautions and opportunities for students, staff, and parents to participate in HIV/AIDS education.

A. UNIVERSAL PRECAUTIONS

Universal Precautions and the provision of supplies necessary for implementing them.

Universal Precautions represent a commitment to safety and prevention. This policy can only work if Universal Precautions are taught annually to all staff and the supplies necessary for implementing them are available and current. Adherence to Universal Precautions should be considered for inclusion, as appropriate, to all staff job descriptions and performance evaluations.

The key to understanding and implementing Universal Precautions is to treat all visible blood, from all students and staff, as potentially infected. Seven procedures are necessary for the implementation of Universal Precautions:

1. Disposable gloves should be worn whenever you find yourself in a position where you could be touching another person's blood.
2. Washing hands and skin is the single most effective health precaution for all viral and bacterial exposures.
3. Properly cover all wounds, cuts, oozing sores, or rashes.
4. Use an approved disinfectant solution (such as bleach and water or AiRx #78) to clean up body fluid spills. Properly dispose of all materials used for clean-up procedures.
5. Reusable cleaning equipment or supplies must be properly cleaned and disinfected.
6. Clothes soiled with blood, vomit, urine, or fecal matter should be handled while wearing gloves, placed in leak-proof bags, and washed in water that is at least 160 degrees in temperature.
7. Avoid accidental needle or other sharp sticks. (Nurses who administer injections should not recap needles. Needles and any other sharp items must be thrown away in puncture-resistant containers).

B. AIDS EDUCATION

A comprehensive ongoing AIDS/HIV education program is available for all students, parents, and staff. School nurse-teachers and health educators should work together in the planning and implementation of all components of an AIDS/HIV education program for students, parents, and staff.

1. STUDENTS

Students receive AIDS education as part of the comprehensive health education program of the Narragansett School System. The health education program addresses disease, disease transmission and disease prevention, high risk behaviors, and medical information at all grade levels in increasing detail and complexity. In each year, the material is expanded eventually to cover all aspects of Universal Precautions, disease prevention and treatment, including STDs. Information is also provided to address student fears and concerns about getting AIDS, provide strategies for confronting their fears and examples of how they can enhance the lives of any friends or family who may be infected with HIV.

2. PARENTS

AIDS/HIV informational sessions, discussion groups and programs are available for parents and parent groups upon request. This will assure that students receive maximum benefit from AIDS/HIV education or any AIDS/HIV policy.

Parents fears, questions, and concerns can be addressed through these sessions and discussion groups. Sessions are planned to address their concerns and questions as well as to provide them with information on transmission. This assures that parents have the information to discuss these concerns with their children.

3. STAFF

All staff need regular professional development in the area of HIV/AIDS. Those who work with and around students need to participate in similar activities as parents. Staff who coach a team, drive busses, clean buildings, provide support services, teach, counsel, or administer education are all likely to be confronted with situations where proper use of Universal Precautions and a thorough understanding of how HIV is and is not transmitted is very important to theirs and others health, safety, and comfort.

V.A.5. HIV Infected Students (continued)

Those who teach about the disease and its relationship to other high-risk behaviors need to deal with their own fears and questions in their roles as health educators, school nurse-teachers, or teachers of students who may be HIV positive. They need to participate in professional development experiences which will increase their comfort level with teaching about HIV and provide assistance in planning and developing meaningful experiences for students.

C. TECHNICAL ASSISTANCE

Staff from the Department of Health, AIDS Office and Department of Education, Office of Integrated Social Services are available to assist school administrators and health personnel in planning sessions for and with parents and staff.

D. REVISION AND REVIEW

This policy will be reviewed annually and revised as necessary to remain current with evolving information about HIV/AIDS infection and transmission.

HIV/AIDS GLOSSARY OF TERMS

Acquired Immunodeficiency Syndrome (AIDS) -- a life threatening form of HIV infection wherein the body's immune system is incapable of fighting off certain types of disease.

Enzyme-Linked Immuno-Sorbent Assay Test (ELISA) -- a test used to detect antibodies in blood samples, used to detect the presence of antibodies to HIV.

Human Immunodeficiency Virus (HIV) -- the accepted name for the recognized casual agent of AIDS.

Sexual Activity -- any sexual contact which may involve the transfer of infectious fluids (i.e. blood, semen, vaginal secretions, breast milk).

Universal Precautions -- precautions which are undertaken to treat all visible blood, and any bodily fluid which may contain blood, as potentially infected.

Western Blot -- a confirmatory blood test for HIV; used after an ELISA test is positive.

REFERENCES

“HIV/AIDS Terminology”, American College Health Association, Rockville, MD, 1989.

Taking Action on AIDS, The Albert E. Trieschman Center, Needham, MA, 1990.

V.A.5. HIV Infected Students (continued)

OSHA Bloodborne Pathogens Standard, 29 CFR 1910.1030.

Narragansett School System, Bloodborne Pathogen Control Plan.

www.cdc.gov/hiv/

[HIV/AIDS Prevention at CDC | CDC HIV/AIDS](#)

RESOURCES

For more information, contact:

Albert E. Honnen, Jr.
Superintendent of Schools
25 Fifth Avenue
Narragansett, RI 02882
401-792-9450

RI Department of Education
Office of Integrated Social Services
HIV/AIDS Specialist
401-222-4600

RI Department of Health
Office AIDS/STDs
401-222-2320

Rhode Island Project AIDS
1-800-726-1010

CDC National AIDS Hotline
1-800-342-AIDS

1st Reading: February 11, 1987

Adopted: April 8, 1987

Amended --

1st Reading: April 12, 1989

2nd Reading: June 7, 1989

Amended --

1st Reading: March 18, 1998

2nd Reading: April 22, 1998

Amended –

1st Reading: November 16, 2005

2nd Reading: December 21, 2005

Narragansett School System
Narragansett, Rhode Island