
**SCHOOL ATTENDANCE FOR STUDENTS INFECTED WITH
HUMAN IMMUNODEFICIENCY VIRUS**

BACKGROUND INFORMATION

This section provides background for the policy statements on school attendance by HIV infected students.

1. The right of students infected with HIV to attend regular classes is based on the medical fact that there is no known risk of transmission as a result of casual contact. It is the position of the Department of Human Services, Bureau of Health that students infected with Human Immunodeficiency Virus should be allowed to attend school with local medical input. In the rare situation that a threat to others is perceived, the extent of that threat can be determined by the Bureau of Health. The reasonable medical judgments of public health officials should be given great weight in determining the nature of the risk, the duration of the risk, the severity of the risk, and the possibilities that the disease will be transmitted and will cause varying degrees of harm.
2. The responsibility for informing anyone of a student's Human Immunodeficiency Virus status, including the school, rests with the parents/guardians of the student. Under current law, the Maine Bureau of Health may not necessarily receive reports of students infected with HIV, and even if notified, will not be in a position to determine public health threats without input from the private medical community. If a public health threat is perceived by a student's physician, the responsibility to inform the Bangor School Department and/or the Bureau of Health of a Human Immunodeficiency Virus infection in a student rests with the private physician. This is consistent, both with current Maine law and public health practices. Neither the school district nor the Bureau of Health would know of communicable diseases unless the private medical community, as well as parents, accepted public health responsibility. The Bureau of Health requires immediate participation by public health professionals when a disease is transmitted through casual contact by aerosol (through air). A disease, such as HIV infection, is transmitted only by contact with certain body fluids (blood and semen primarily, breast milk rarely – no recorded cases transmitted by saliva, urine or feces). With appropriate education, opportunities for transmission can be understood by parents. Students who are infected with Human Immunodeficiency Virus would be monitored by their physicians and parents.
3. If any changes in condition or behavior exist, the student's physician and the Maine Bureau of Health must determine whether a risk of transmission exists. If it is determined that a risk exists, the student should be removed by the Superintendent, in conjunction with the Bureau of Health, from the regular school program or from the school setting entirely.

Under the following circumstances, a student with HIV might pose a risk of



transmission to others:

- a) a student who has open sores that cannot be covered;
- b) a student who demonstrates “acting out” or combative behavior which could result in direct inoculation of potentially infected body fluids into the bloodstream of another person; and
- c) a student who exhibits neurological conditions or other symptoms which may contribute to “a” or “b”.

A child with HIV may be temporarily removed from the classroom for the reasons stated above until either an appropriate school program adjustment can be made, an appropriate alternative education program can be established, or the student’s physician, in consultation with the Maine Bureau of Health, determines that the risk has abated and the student can return to the classroom. The Bangor School Department should be flexible in its response and attempt to use the least restrictive means to accommodate the student’s needs. In any case of temporary removal of the student from the school setting, state regulations and school policy regarding homebound instruction must apply.

2. At the present time, Maine law is strict about the confidentiality of HIV test results. Test results should be available only to the physician treating the patient and others involved with the care of that patient at the discretion of patient/parent/guardian. A violation of confidentiality may result in penalties from \$1,000 to \$5,000. In the case of school, parents/guardians may decide who should have access to test results. This is consistent with standard practice. Information pertaining to a student’s health status is usually provided to school officials directly by parents. This exchange of health information most often occurs for the benefit of the student (for example, a child with insulin-dependent diabetes or epilepsy). Public health officials do not routinely report infections in a student to school officials. Only in instances where there is a discernible risk of exposure to other students would public health officials have the authority to inform school officials of a student’s health status.

The diagnosis of HIV or associated illnesses evokes much fear from others in contact with the patient and may evoke suspicion of lifestyles that may not be acceptable to some persons. The issue of confidentiality and the potential for social isolation, should knowledge of the student’s condition become known to others in the educational setting, needs to be discussed with the student and the student’s parents.

School personnel and others involved in education and caring for these students should be sensitive to the need for confidentiality and the right to privacy in these cases, including maintaining confidential records. The number of personnel made aware of the student’s condition should be kept at a minimum needed to assure proper care of the student and proper protection for individuals the student comes in contact with. The Bureau of Health would notify school personnel of a student’s infection only if requested, in writing, to do so by the parents, or if such notification was determined to be essential on the grounds of a public health threat.

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- 5 and 6. It is likely that the greatest risk for illness will be to the student infected with HIV, and



not his/her classmates or teachers. In the event that parents/guardians have given written consent to school authorities, a designated team or individual should function both to protect the student infected with HIV from any medical risks which may arise at school, and watch for any possible public health risk posed to classmates or staff by the student infected by HIV. The school nurse is a logical person to serve as a member of the designated team and can best serve as the supervisor of the medical component of the student's care in the school. A student with HIV, as with any other immunodeficient student, may need to be removed from the classroom for his/her own protection when cases of measles, chicken pox, or selected infectious diseases occur in the school population. This decision should be made by the student's physician and parent/guardian in consultation with the school nurse, and/or the school physician and the Director of the Maine Bureau of Health or his/her designee.

7. Routine and standard procedures should be used by all school personnel to clean up after an individual has an accident or injury. Blood or other body fluids emanating from any individual should consistently be treated with caution. Gloves should be worn when cleaning up body fluid spills. These spills should be cleaned with soap and water and disinfected with either household bleach (diluted one part bleach with ten parts water) or intermediate disinfectant. Persons coming in contact with these spills should thoroughly wash their hands with soap and water. Disposable towels or tissues should be used and mops should be rinsed in the disinfectant. Those who are cleaning should avoid exposure of open skin lesions or mucous membranes to the blood or body fluids.

Items soaked with body fluids should be placed in leakproof bags for washing or further disposition. Similar procedures are recommended for dealing with vomitus and fecal or urinary incontinence in any individual. Hand washing after contact with any individual is routinely recommended if physical contact has been made with the individual's body fluids, including saliva. (These procedures are summarized in CDC Guidelines for Isolation Precautions in Hospitals.) Generally, good hand washing provides the best defense against most infectious diseases.

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