

## COMMUNICABLE DISEASES

JLCC-R

- I. Definitions
  - A. AIDS shall mean acquired immunodeficiency virus.
  - B. HIV shall mean human immunodeficiency virus identified as the causation agent of AIDS.
- II. State Law
  - A. Knowledge of Student's Identity
    - 1. The identity of any person upon whom an HIV test is performed, and the results of the test, are confidential under the terms of 16 Delaware Code, Chapter 12. Such information may be shared only if a legally effective release is given by a competent student age eighteen or over or by the parents/guardians of other students. 16 Delaware Code, §1203.
    - 2. State and district policy statements regarding student attendance are applicable only when the parents/guardians have given written permission to share the identity of the student with designated personnel.
  - B. School Attendance and Placement of Student

State policy adopted by the State Board of Education, December 1985, requires that a student entering kindergarten through grade 12 with HIV infection attend school unless at least one of the following conditions exist:

    - 1. The student has open sores that cannot be covered.
    - 2. The student has demonstrated physically aggressive behavior with a documented history of biting or harming others.
    - 3. The student is, in the opinion of the student's physician, at risk from communicable diseases present in the school or from other medically related problems.
  - C. Removal of Student with HIV Infection
    - 1. A decision by a local school district to remove a student from school will be reviewed by a state advisory panel composed of the State Health Officer, the State Epidemiologist, a representative from the Medical Society of Delaware, a representative from the State Department of Education, a school nurse, and a school superintendent. If recommended by the student's physician, the student will remain in school until a determination is made by the panel. Parents/guardians will be advised of planned actions, and their advice and consent will be sought.
    - 2. A school-aged child with HIV infection who is removed for reasons stated above shall be provided with an appropriate alternative education according to already established procedures.
- III. District Regulations for Students
  - A. Knowledge of Student's Identity

The identity of the student can be shared if the parents/guardians of a student less than eighteen years old give written permission according to HB 559. The student's identity will be known only to those persons so designated by the parents/guardians. The Superintendent, the principal of the student's school, and the school nurse should be aware of the student's identity unless otherwise designated by the parents/guardians.
  - B. School Attendance and Placement of Student

The Seaford School District will adhere to the state policy as outlined in II., B.
  - C. District Advisory Committee on Students with HIV Infection

A District Advisory Committee on students with HIV infection will be comprised of the following individuals:

    - 1. The county health officer
    - 2. The district physician or representative from the county medical society
    - 3. A school nurse
    - 4. School or district administrator

5. The attorney for the district

The District Advisory Committee shall consult as soon as practical with the student's physician, with the parents'/guardians' permission. The committee may, with the parents'/guardians' permission, consult with any other appropriate individuals including, but not limited to, the principal and school nurse of the student's school for the purpose of determining what, if any, restrictions on the student's placement are necessary to protect the student and/or the school community. Technical assistance can be obtained from the State Department of Education and the Division of Public Health.

D. Removal from School

The District Advisory Committee shall recommend that an HIV-infected student be removed from school only if he or she exhibits one of the three factors identified in the State Department of Education policy and there is no other means by which the school community can reasonably be protected. If the District Advisory Committee determines that the student with HIV infection should be removed from school for one of the three reasons identified in the State Department of Education policy, the recommendation to remove the student from school, together with a proposed plan to provide the student with an appropriate alternative education, will be presented to the Seaford Board of Education. If the Board adopts the recommendation of the District Advisory Committee to remove a student from school, that decision shall be referred immediately to the state advisory panel for review, along with evidence that the student exhibits or manifests the symptoms which justify exclusion and a current report from the student's personal physician. If recommended by the student's physician, the student will remain in the school until a final determination is made that the student is to be removed.

E. Recommendation for Program Restrictions

If the District Advisory Committee determines that certain restrictions on an HIV-infected student's activities at school are medically necessary to protect the well-being of the student and/or the school community, those restrictions will be discussed with the parents/guardians and, if appropriate, the student, and will be implemented in a way that, to the extent reasonably possible, the nature of the student's infection will be kept confidential. If the student is identified as handicapped and if the proposed restrictions are such as to constitute a change in the student's educational placement, the decision regarding the child's appropriate placement will be referred to the district's IPRD Committee.

F. Confidentiality of Records

The Family Educational Rights and Privacy Act (also known as the Buckley Amendment), 10 U.S.C., §1232g, and applicable regulations 34 C.F.R., Part 99, prohibit the release of student records without the written consent of the student's parents/guardians. In addition, state law, 14 Delaware Code, §4111, establishes that personal records of pupils, including psychological and medical records, are confidential and not to be disclosed to non-school personnel.

While confidentiality is important for all student records, it is especially critical for a child infected with HIV because of the controversial nature of the information. If students and their families are to trust the district and share information that the student has tested positive for the HIV antibody, they must be able to rely on the district's ability to keep that knowledge confidential.

It shall be the responsibility of the student's school nurse to ensure that no references to the HIV infection shall be kept in the student's standard health records unless otherwise requested in writing by the parents/guardians of an HIV-infected student under eighteen years of age or by an HIV-infected student eighteen years or older. A parent/guardian or student eighteen years or older who requests in writing that references to the student's HIV infection be placed in the student's standard health records should realize that such information may therefore be available to other school personnel. All information and

documentation relating to the student's HIV infection shall be maintained in a separate secured file with the Superintendent and the building principal.

**G. Relationship with Student and Student's Family**

It is the responsibility of the student's building principal and school nurse to maintain ongoing communication with the student, the student's family, and the student's physician. The district should make reasonable attempts to inform the student and the student's parents/guardians about decisions relating to the student's placement and any restrictions before they are implemented. The student and the student's family should regularly keep the student's school nurse informed of the student's medical condition. With the parents'/guardians' consent, the student's school nurse and/or the district physician shall communicate on a regular basis with the student's physician to monitor the student's medical and psychological condition and to identify decisions and actions advisable to protect the welfare of the student and of the school community. The school nurse, in cooperation with the building principal, shall function as the advocate for the student in the school, assisting in problem resolution and answering questions, and as the coordinator of services provided by other staff.

The student or the student's family may choose to make information about the student's medical condition public. Should there be any harassment and/or intimidation of the student in the school environment, the district shall state clearly its refusal to tolerate such behavior. The district may also take any other action appropriate to deal with fears, concerns, and misinformation in the school community.

EFFECTIVE: 6/1/89