



## ADMINISTRATIVE PROCEDURE

### MANAGEMENT OF HIV INFECTION IN THE SCHOOL SETTING

2900

Procedure No.

May 1, 2003

Date

- I. **PURPOSE:** To present information of HIV/AIDS as it relates to confidentiality, school attendance and placement, infection control, education for school and school staff and athletics.
  
- II. **INFORMATION:** Children and youth with human immunodeficiency virus (HIV) infection attend schools regularly. HIV causes the disease Acquired Immune Deficiency Syndrome (AIDS). “Pediatric HIV is no longer viewed as a fatal, rapidly progressive condition, but rather as a chronic, manageable disease with prolonged survival.”<sup>1</sup> Students and youth with HIV or AIDS are in Prince George's County Public Schools. The guiding principles for management of students with HIV infection include maintaining confidentiality, educating the student in the least restrictive environment, and addressing the functional needs of the student.
  
- III. **BACKGROUND:** HIV is one of several identified bloodborne pathogens; others include hepatitis B and C viruses. HIV can spread from one person to another by exposure to blood or certain other body fluids. This virus can cause serious illnesses. There are no cures for the diseases caused by HIV and other bloodborne pathogens; however, certain treatments may help improve the quality and length of life. The most common methods of spreading HIV are unprotected sexual intercourse with an infected person, injection of infected body fluids (such as occurs from sharing drug injection equipment), and transmission from an infected mother to her baby during pregnancy, childbirth, or breast-feeding. The virus can also be transmitted when a person’s skin is punctured with a needle that contains infected blood, or by getting blood or other infected body fluids in the eyes, mouth, or on broken skin (e.g., through splashing). Refer to the Bloodborne Pathogens Exposure Control Plan (attached) for information on managing exposures to body fluids. Body fluids known to transmit HIV are blood, breast milk, semen and vaginal secretions. HIV is not spread by casual contact with an infected person, (e.g., hugging, sharing eating utensils, touching, sitting next to someone, shaking hands, sharing food or drink, or closed-mouth kissing). Sweat, tears, nasal discharge, urine, feces, and saliva do not transmit HIV.

The implementation of standard precautions is advised for all school personnel. Standard precautions are a method of infection control that advocates the use of gloves and/or other protective equipment whenever there is a risk of exposure to all human blood and body fluids.

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<sup>1</sup> Nielsen, Karin, MD, MPH. *Recent Advances in the Clinical Management of HIV-Infected Infants and Children*. Medscape HIV/AIDS: Annual Update 2000.



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- IV. **DEFINITIONS:** The following definitions are pertinent to the Administrative Procedure. They describe various classifications of infection with a virus called Human Immunodeficiency Virus (HIV), which causes AIDS.
- A. Acquired Immune Deficiency Syndrome (AIDS) - The name given to the latter stages of HIV infections, characterized by severe symptoms of illness and other specific clinical manifestations such as opportunistic infections and severe reduction of white blood cells.
  - B. Bloodborne Pathogens - Pathogenic microorganisms present in human blood that can cause disease in humans. These pathogens include, but are not limited to, Hepatitis B virus (HBV), Hepatitis C (HVC), and the Human Immunodeficiency Virus (HIV).
  - C. Hepatitis B Virus (HBV) - The pathogen that causes one form of liver infection and is transmitted by blood and other body fluids containing blood such as semen and vaginal secretions.
  - D. Human Immunodeficiency Virus (HIV) - The pathogen that causes HIV infection and is transmitted from one person to another by blood, semen, vaginal secretions, and breast milk. The infected person can be without symptoms of illness for 10 to 20 years. However, presence of the infection can be detected within a few weeks to six months with HIV antibody tests.
  - E. Opportunistic Infections - An infection with a bacterium, parasite, fungus, or virus, which is common in the environment and usually found normally on the mucous membranes and/or skin of healthy individuals or in the environment, but which does not normally cause disease in a person with a healthy immune system.
  - F. Parents - Refers to parents or legal guardians.
  - G. Physicians - Refers to physicians or medical service providers.
  - H. Standard Precautions - An approach to infection control where all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, HVC, and other bloodborne pathogens.
- V. **CONFIDENTIALITY:** Parents and guardians are not required to disclose a student's HIV infection status in order for the student to attend school; likewise, students are not required to disclose HIV status to school staff. If health protection issues for the student are involved, it may be advantageous to disclose this information to the designated school health professional. If the parent, guardian, or



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student chooses to disclose to other staff, it is recommended that the persons selected be kept to a minimum. The staff to be considered when the choice to disclose has been made includes the school nurse, the principal, classroom teacher(s), and instructional assistants. Any staff member with this medical information should be instructed that the information is confidential and cannot be shared with anyone without expressed consent from the parent/guardian.

All health records, notes, and other documents that reference a student's HIV status will be kept in a secure location, not the school health record (PDS-5), LAF or CUM. Access to these confidential records is limited to those named in written permission from the parent/guardian. Student record information is confidential and only school officials with a legitimate need to know the information, or others enumerated under the law, may have access to a student's record.

#### VI. **PROCEDURES:**

##### **SCHOOL ATTENDANCE AND PLACEMENT:**

- A. A student with HIV infection has the same right to attend school and receive services as any other student, and will be subject to the same rules and local school policies. HIV infection status alone should not factor into decisions concerning class assignments, privileges, or participation in any school-sponsored activity. Rather, such decisions should be made on a case by case basis depending on the particular factual circumstances.
- B. School authorities will determine the educational placement of a student known to be HIV infected on a case-by-case basis following already established policies and procedures for students with chronic health conditions or students with disabilities. Students with special health needs who do not qualify for special education services under the Individuals with Disabilities Education Act (IDEA) may be entitled to reasonable accommodations pursuant to Section 504 of the Rehabilitation Act of 1973. The school team including health services should consult with the student's parent or guardian. Placement may be reassessed if there is a change in the student's need for accommodations or services. Respect for the student's and family's rights to privacy must always be maintained.
- C. School staff members will always strive to maintain a respectful school climate and not allow physical and verbal harassment of any individual or group by another individual or group.
- D. All students in Prince George's County Public Schools have the right to an



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Educational environment that is free from any form of harassment (Code of Maryland Regulations 13A.04.05.05-1). This includes harassment of a person who is HIV infected, a person perceived as being HIV infected, or a person associated with someone who is HIV infected.

- E. The student's health care provider and school nurse should perform a regular assessment of the student's current needs. Permission to share information between the student's health care provider and school nurse is required in order to plan for the health needs of the student in the school setting.

#### **INFECTION CONTROL:**

All employees are required to consistently follow direction control guidelines in all settings and at all times, including on playgrounds and school buses. Schools will operate according to the Maryland Occupational Safety and Health (MOSH) Bloodborne Pathogens Standard. Equipment and supplies needed to apply the infection control guidelines will be maintained and kept reasonably accessible in school buildings, playgrounds, and school buses. If a situation occurs at school in which a person may have been exposed to an infectious agent, such as an instance of blood-to-blood contact, the following steps must be taken. It is the responsibility of all adults in the school setting to remind and reinforce the importance of blood safety, i.e., do not touch any body fluids, cuts, abrasions, or lesions. School authorities shall counsel both parties to seek appropriate medical evaluations (refer to the Bloodborne Pathogens Exposure Control Plan). School staff should alert the school health professional if a student's health condition or behavior presents a reasonable risk for transmitting an infection.

#### **HIV AND ATHLETICS:**

- A. HIV infection alone does not determine if a student participates in physical education classes, athletic programs, competitive sports, and recess. Students with HIV infection should be encouraged to participate in all school activities provided they are medically able to do so. A participant in an interscholastic athletic event faces very low risk of an infectious disease like HIV as long as standard precautions, other infection control precautions (e.g., covering existing cuts and abrasions) and common sense management of injuries are implemented.<sup>2</sup> Routine testing of athletes is not indicated, as there is no medical or public health justification for testing or screening for HIV infection prior to participation in sports. Schools will make reasonable accommodations

<sup>2</sup> American Academy of Pediatric Committee on Sports Medicine and Fitness. *Pediatrics*, Vol. 104 No. 6 December 1999. *Human Immunodeficiency Virus and Other Bloodborne Viral Pathogens in the Athletic Setting*.



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to allow students living with HIV infection to participate in school sponsored physical activities. Confidentiality and the right to privacy of families should be protected at all times.

- B. All school personnel, including teachers, administrators, athletic directors, maintenance workers, and others should be trained regarding standard precautions and correct handling of body fluids. Gloves and first aid kits are to be readily available in the event an injury occurs with bleeding that requires intervention.
- VII. **RELATED PROCEDURES:** Bulletin PS-19-02-Bloodborne Pathogens Exposure Control Plan; Code of Maryland Regulations 13A.04.05.05-1 and 13A.04.18.04.
- VIII. **MAINTENANCE UPDATE AND UPDATE OF THESE PROCEDURES:** The Department of Pupil Services will maintain and update this Administrative Procedure in conjunction with information provided by Prince George's County Health Department, Maryland State Department of Education, Maryland State Department of Health and Mental Hygiene, U.S. Department of Health and Human Services, and the United States Centers for Disease Control and Prevention.
- IX. **CANCELLATIONS AND SUPERSEDES:** This Administrative Procedure cancels and supersedes Administrative Procedure 2900, dated July 2, 1990.
- X. **EFFECTIVE DATE:** May 1, 2003.

Approved by:  
Iris T. Metts  
Chief Executive Officer

Attachment: Bloodborne Pathogens Exposure Control Plan (Please call 301-952-6001 for a copy of this attachment.)

Distribution: Lists 1, 2, 3, 4, 5, 6, 10, and 11