

GUIDELINES AND PROCEDURES CONCERNING HIV OR OTHER COMMUNICABLE DISEASES (STUDENTS AND EMPLOYEES)	3.20
---	-------------

I. Introduction

- A. It is the policy of this School Board to seek to provide, in the least restrictive environment, for the educational needs of each student to the maximum extent consistent with the needs of other students and the health, safety and welfare of all. One factor necessary in implementing this policy is that of providing AIDS-related education and awareness for students. Another such factor is that of adopting and implementing procedures to be followed in instances where the administration is notified by the parent, as defined by Florida Statutes, student or another employee that a student is known to have the Human Immunodeficiency Virus (HIV) or Acquired Immunodeficiency Syndrome (AIDS).
- B. This rule delineates also the policy of this School Board in utilizing the services of employees who have HIV, or AIDS. The purpose of the policy is the protection of the right of these employees to continued employment, while also recognizing the School Board's obligation, as an employer and educational agency, to provide an environment that is not only objectively safe for all employees, students and the public at large, but that is also one where, insofar as practicable and reasonable, employees and students do not have fears for their health or safety.
- C. In providing communicable disease education to include Hepatitis B and awareness for students, an important goal will be

to make it clearly and convincingly understood that, as to the present and the foreseeable future, there is no known or definitely expected cure for AIDS; and that most cases of AIDS resulted from behavior that can be avoided.

- II. In all matters related to this rule, directly or indirectly, all employees shall strictly observe and protect the rights of all students and their parents regarding privileged or confidential information.

III. Student Guidelines and Procedures

CHAPTER 3.00 – SCHOOL ADMINISTRATION

Epidemiological studies show that HIV is transmitted via contact with the body fluids of the infected person. Since there is no evidence of casual transmission by sitting near, living in the same household, or playing together with an individual who has HIV infection, the following guidelines have been developed:

A. Circumstances Warranting Special Action

No student shall be excluded from attending regular classes solely because the student has been diagnosed as having HIV or AIDS including clinical evidence of infection with HIV. However, if a child so diagnosed evidences any one of the following conditions, the Superintendent of Schools with consent of the parent will convene an Advisory Panel for the purpose of making recommendations on the most appropriate educational placement of the student:

1. Manifestation of clinical signs and/or symptoms that indicate progression of the illness;
2. Demonstration of behavior risky or harmful to self or others;
3. Demonstration of unstable or decompensated neuropsychological behavior;
4. Presence of open wounds, cuts, lacerations, abrasions, or sores, on exposed body surfaces where occlusion cannot be maintained; and
5. Impairment of gastrointestinal and/or genito-urinary function such that control of internal body fluids cannot be maintained.

B. In the event the parent refuses to authorize release of information regarding the student, the Superintendent shall request a review by the County Health Officer. If the County Health Officer determines that students or school personnel are likely to be significantly exposed to body fluids of the student, the Superintendent may proceed with establishment of the panel, notwithstanding the refusal of the parent.

C. Composition of Advisory Panel

1. Superintendent of Schools;
2. Director and Health Officer of the County Health Department or designee;

CHAPTER 3.00 – SCHOOL ADMINISTRATION

3. Attending physician of the student with HIV infection;
4. Director of Exceptional Student Education;
5. Student's principal or principal's designee;
6. Infectious disease specialty physician, when and as determined by the Superintendent as appropriate;
7. Other professional staff to include Health Services Staff when and as determined by the Superintendent as appropriate;
8. Case Manager (optional); and
9. Student's parent(s), when and as appropriate or requested, who shall not be official member of the panel.

D. Panel Responsibilities

1. Review student's medical history and current status (note: student identity dependent upon parent or guardian written release);
2. Review available educational and social data, progress reports as available, test results, prior school placements;
3. Discuss educational options, considering risks and benefits;
4. Reduce to writing findings, options, and recommendations and review draft report before submission to the Superintendent, focusing on key issues, unresolved problems, if any, and summary recommendations;
5. Submit written report to the Superintendent within twenty-four (24) days and remain available as needed; and
6. Re-evaluate each panel case on a continuing basis at least once every six (6) months and more often when circumstances change in the categories listed in III.A.

The general intent is that the Advisory Panel is to serve as an expert professional resource to advise the Superintendent in special situations where information about appropriate environment may not be available, complete, clear, or readily amenable to lay interpretation. It is expected that recommendations of the Advisory Panel shall be based solely upon current medical and educational

CHAPTER 3.00 – SCHOOL ADMINISTRATION

information consistent with established ethical guidelines and considerations in accordance with extant guidelines of the Centers for Disease Control and Prevention and other scientific and relevant professional bodies.

E. Panel Protocol

1. If the Superintendent determines that any one of the conditions in III.A. exists, the student in question will be placed on homebound instruction status for no longer than five (5) school days.
2. Within the five (5) school day period (equivalent to one calendar week), consent for release of medical information will be obtained, and past medical history, laboratory tests, and other relevant records will be provided to and reviewed by the Director of the Health Department and by other physicians as appropriate. Critical medical tests and other procedures will be conducted during this period by the Director of the Health Department or by other medical practitioners as warranted.
3. Based on results and medical interpretation of the student's current status, the Director of the Health Department and other consultants as appropriate will advise the Superintendent within five (5) days whether continued homebound instruction is or is not warranted.
4. If medical review indicates that continuation of special status is not indicated, the student will return to regular status at the end of the five (5) school day initial review period or upon the advice of the director of the Health Department, whichever is sooner.
5. If medical review indicates that continuation of special status is indicated, the student will remain on homebound instruction, for a period not to exceed fifteen (15) additional school days (equivalent to three more calendar weeks).
6. During the twenty (20) school day review period, the Superintendent will arrange the following steps in preparation for Advisory Panel review:

CHAPTER 3.00 – SCHOOL ADMINISTRATION

- a. Alert Advisory Panel of forthcoming meeting to be scheduled.
- b. Obtain written authorization from parent(s) of student to contact attending physician for medical information.
- c. Obtain signed consent from parent(s) of student to permit release of information from attending physician and others to the Superintendent.
- d. Receive relevant medical and social information about the student with HIV infection and maintain same in strict confidence. Any written form to be reviewed will be shared in meetings with the panel and kept on file in Superintendent's or Health Department Director's confidential files (see III.H.).
- e. Circulate confidential information about the HIV infected student to the Advisory Panel members only.
- f. Schedule and notify the Advisory Panel members of initial review meeting, at date, time and location suitable to all; meeting will be scheduled only when complete medical information has been obtained and circulated in advance to all Advisory Panel members.

F. Siblings

Siblings of children diagnosed as having HIV, AIDS, or with clinical evidence of infection with HIV are able to attend school without any restrictions.

G. Exclusion from School

Since the student diagnosed as showing clinical evidence of infection with the AIDS-Associated Virus (HIV or AIDS) has an increased risk of acquiring infections in the school setting, the student will be excluded from school if there is an outbreak of a threatening communicable disease; upon the advice of the County Health doctor or the child's private physician such as, chicken pox or measles, until he/she is properly treated and/or the outbreak is no longer a threat to the child.

CHAPTER 3.00 – SCHOOL ADMINISTRATION

H. Privacy - Disclosure

Medical information shall be kept in strict confidence consistent with the Family Educational Rights and Privacy Act (FERPA), the Health Insurance Portability and Accountability Act (HIPAA) and other regulations.

IV. Employee Guidelines and Procedures

A. Statement of Purpose and Scope

This section establishes the policy of the School Board for working with employees who have a communicable disease such as Hepatitis B, HIV, or AIDS, and is applicable to all employees of the School Board.

B. Employee Policy

The School Board recognizes that employees with life-threatening illnesses, including, but not limited to, cancer, heart disease, and AIDS-related illnesses may wish to continue to 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 others, employees shall be assured of continued employment.

C. Training and Education

1. Medical studies show that HIV infection is transmitted via contact with body fluids especially semen, preseminal fluid, blood, and menstrual flow of an infected person. To date, there is no record of transmission of the AIDS-associated virus (HIV) to coworkers, clients or consumers in offices, schools, factories, construction sites or other workplaces. There is no evidence of casual transmission by sitting near or working in the same office or sharing the same water fountain, telephones, toilets, eating facilities or office equipment with a person infected with HIV.
2. Many of the problems that arise in the workplace when employees are confronted with a fellow employee who has become HIV infected are caused by lack of knowledge about the disease and misunderstanding of the way in which it is transmitted. The only means of combating this fear is education. Supervisors should make a concerted effort to educate themselves as to the facts regarding HIV infection and how it is and is not transmitted and,

CHAPTER 3.00 – SCHOOL ADMINISTRATION

further, should make the same effort to educate their employees. Any information needed will be furnished by the School Board office. Supervisors should be sensitive and responsive to coworkers' concerns and emphasize employee education.

D. Confidentiality

The School Board realizes that an employee's health condition is personal and confidential. Medical files or medical information about employees are exempt from public disclosure. In addition, information relating to a specifically named individual, the disclosure of which would constitute an unwarranted invasion of personal privacy, is prohibited. Special precautions should be taken to protect such information regarding an employee's health condition to prevent instances of disclosure that may invade the personal privacy of an employee. Unless specifically authorized by the employee, release of such information shall only be made in emergency situations to personnel who have a significant exposure to the blood or body fluids of the person. Written authorization of such release should be kept in a confidential file under lock and key in the Superintendent's or Health Department Director's office.

E. Circumstances Warranting Special Action

No employee is prohibited from reporting for duty solely because the employee has been diagnosed as having HIV or AIDS, including clinical evidence of infection with the AIDS-associated virus (HIV). However, medical reports and information relative to the employee's condition shall be regularly examined and monitored by school authorities (health officials designated by the Superintendent and County Health Department Director). If an employee so diagnosed evidences any of the following conditions, the Superintendent of Schools may, with consent of the employee, convene an Advisory Panel for the purpose of making recommendation on the most appropriate work assignment for the employee:

1. Manifestation of clinical signs and/or symptoms which indicate progression of the illness;

CHAPTER 3.00 – SCHOOL ADMINISTRATION

2. Demonstration of behavior risky or harmful to self or others;
 3. Demonstration of unstable or decompensated neuropsychological behavior;
 4. Presence of open wounds, cuts, lacerations, abrasions, or sores on exposed body surfaces where occlusion cannot be maintained; and
 5. Impairment of gastrointestinal and/or genito-urinary function such that control of internal body fluids cannot be maintained.
- F. Composition of the Advisory Panel
1. Superintendent of Schools;
 2. Director and Health Officer of the Health Department or designee;
 3. Attending physician of the employee with HIV infections;
 4. Infectious disease specialty physician, when and as determined by the Superintendent as appropriate;
 5. Other School District Health Services staff, when and as determined by the Superintendent as appropriate;
 6. The employee when and as appropriate or requested, who should not be an official member of the Panel; and
 7. Case Manager (optional).
- G. Panel Responsibilities
1. Review employee's medical history and current status (note: employee identity dependent upon written release);
 2. Review available social data, prior school assignments, and employment history;
 3. Discuss with employee the employment options, as applicable, considering risks and benefits;
 4. Reduce findings, options, and recommendations to writing and review draft report before submission to Superintendent, focusing on key issues, unresolved problems, if any, and summary recommendations;

CHAPTER 3.00 – SCHOOL ADMINISTRATION

5. Submit written report to the Superintendent within fourteen (14) days and remain available as needed; and
6. Re-evaluate each panel case on a continuing basis at least once every six (6) months and more often when circumstances change in the categories listed in IV.E.

The general intent is that the Advisory Panel is to serve as an expert professional resource to advise the Superintendent in special situations where information about appropriate environment may not be available, complete, clear or readily amenable to lay interpretation. It is expected that recommendations of the Advisory Panel shall be based solely upon current medical and employment information consistent with established ethical guidelines and considerations in accordance with extant guidelines of the Centers for Disease Control and Prevention and other scientific and relevant professional bodies.

H. In the event the employee refuses to authorize release of information to the panel, the Superintendent shall request a review by the County Health Officer. If the County Health Officer determines that students or school personnel are likely to be significantly exposed to blood or body fluids of the employee, the Superintendent may proceed with establishment of the panel, notwithstanding the refusal of the employee.

I. Panel Protocol

1. If the Superintendent determines that any one of the conditions in IV.E. exists, the employee in question will be placed on special assignment for no longer than five (5) work days.
2. Within the five (5) work day period (equivalent to one calendar week), consent for release of medical information will be obtained and past medical history, laboratory tests, and other relevant records will be provided to and reviewed by the Director of the Health Department and other physicians as appropriate. Critical medical tests and other procedures will be conducted during this period by the Director of the Health Department or other medical practitioners as warranted.
3. Based on results and medical interpretation of the employee's current status, the Director of the Health Department and other consultants as appropriate will advise the Superintendent within five

CHAPTER 3.00 – SCHOOL ADMINISTRATION

(5) days whether a continuation of special assignment is or is not warranted.

4. If medical review indicates that continuation of special assignment is not indicated, the employee will return to regular status at the end of the five (5) work day initial review period or upon the determination of the Superintendent, whichever is sooner.
5. If medical review indicates that continuation of special assignment is warranted, the employee will remain on special assignment for a period not to exceed fifteen (15) additional work days (equivalent to three (3) more calendar weeks).
6. During the twenty (20) work day review period, the Superintendent will arrange the following steps in preparation for Advisory Panel review:
 - a. Alert Advisory panel for forthcoming meeting to be scheduled;
 - b. Obtain written authorization from employee to contact attending physician for medical information;
 - c. Obtain signed consent from employee to permit release of information from attending physician and others to Superintendent of Schools.
 - d. Receive relevant medical and social information about the employee with HIV infection and maintain same in strict confidence.
 - e. Circulate confidential information about the HIV-infected employee to the Advisory Panel members only.
 - f. Schedule and notify the Advisory Panel members of initial review meeting, at date, time and location suitable to all; meeting will be scheduled only when complete medical information has been obtained and circulate in advance to all Advisory Panel members.
 - g. Medical information shall be kept in strict confidence consistent with the Health Insurance Portability and Accountability Act (HIPAA) and other regulations.

CHAPTER 3.00 – SCHOOL ADMINISTRATION

V. Sanitation and Waste Disposal

Blood or any other body fluids including vomitus, fecal, or urinary products of any student or employee should be treated cautiously. It is required that gloves be worn when cleaning up any body fluids from any student.

- A. These spills should be cleaned up with a fresh solution of bleach [no older than twenty-four (24) hours; one (1) part bleach to ten (10) parts water] or another EPA and District approved disinfectant, by pouring the solution around the perimeter of the spill.
- B. All disposable materials, including gloves, should be discarded in a manner prescribed by the County Health officer for disposal of biohazardous waste, in order to eliminate exposure of employees and students. Mops should also be disinfected with the bleach solution described in V.A.

STATUTORY AUTHORITY:

1001.41, 1001.42, F.S.

LAW(S) IMPLEMENTED:

381.0098, 1000.21, 1001.62(1)(c), 1001.42,
1001.43, 1002.22, 1010.305, 1011.62, F.S.

STATE BOARD OF EDUCATION RULE(S):

6A-6.03020, 6A-6.0331

STATE DEPARTMENT OF HEALTH RULE(S):

64E-16

HISTORY: ADOPTED: _____

REVISION DATE(S): _____