

## **AIDS/ACQUIRED IMMUNE DEFICIENCY SYNDROME SCHOOL ATTENDANCE**

The U. S. Centers for Disease Control, American Academy of Pediatrics, and Massachusetts Department of Public Health have updated their recommendations to schools. The updated guidelines state that except in a very rare set of situations where a student chronically bleeds uncontrollably, a student with AIDS or HIV infection poses no risk of transmission of HIV infection through the kind of casual contact which occurs in a school setting. Therefore, a student with AIDS or HIV infection has the same right to attend school and participate in school programs as any other student.

Infants, toddlers and preschoolers with HIV infection/AIDS should be admitted to early childhood settings if their health, neurologic development, and behavior are appropriate. As with the enrollment of any child, regardless of HIV status, the parent or guardian and the early childhood program director (or, where there is no director, the primary caregiver) will discuss the appropriateness of the child for the setting. With consent of the parent or guardian, the physician will provide information regarding the child's HIV status.

Health care providers (such as school nurse or school physician) or a health care facility cannot disclose a student's HIV antibody test result. Without specific, informed, written consent, that provider or facility violates state law (M.G.L. C.111 s.70F) and possibly faces a civil suit brought on by the student or the student's parent(s) or guardian(s). Other school staff may be held liable for violating the privacy law and likewise are open to being sued by the student or the student's family.

**In short, information about a student's AIDS/HIV status should be treated as highly confidential, and released only with the specific, informed, written consent of the student or student's parent(s) or guardian(s).**

The following guidelines are recommended by the Governor's Task Force on AIDS for implementation in school systems throughout the Commonwealth.

1. All children diagnosed as having AIDS or with clinical evidence of infection with AIDS associated virus, Human Immunodeficiency Virus (HIV), and receiving medical attention are able to attend regular classes.
  - A. If a child has cutaneous (skin) eruptions or weeping lesions that cannot be covered, he/she should not be in school.
  - B. If the child exhibits inappropriate behavior that increases the likelihood of transmission (i.e., biting or frequent incontinence); he/she should not be in school.
  - C. Children diagnosed with AIDS or with clinical evidence of infection with the AIDS associated virus (HIV), who are too ill to attend school, should have an appropriate alternative education plan.

D. Siblings of children diagnosed as having AIDS or with clinical evidence of infection with the AIDS associated virus (HIV) are able to attend school without any further restrictions.

2. The student and student's parents(s) or guardian(s) are the gatekeepers of information relating to the student's AIDS/HIV status. **They are not obliged to disclose this information to school personnel.** In consultation with the student's primary care physician, the student and student's parent(s) or guardian(s) may decide to inform certain personnel about the student's AIDS/HIV status, particularly the school nurse or school physician.

If school authorities believe that a child diagnosed as having AIDS or with clinical evidence of infection with the AIDS associated virus (HIV) has evidence of conditions described in #1A or #1B, then the school authorities can dismiss the child from the class and request authorization from the child's personal physician so that class attendance is within compliance with the school policy. If school authorities and the child's personal physician are in conflict, then the case should be referred to the Department of Public Health for review by an appointed physician who would determine the permissibility of attendance.

School officials, administrators and teachers throughout the Commonwealth have demonstrated their commitment to preserving the rights of students with AIDS/HIV to attend school and participate in school programs and activities, as well as to educate all students in accordance with the Board of Education's Policy on AIDS/HIV Prevention Education (April, 1990). All school staff should be informed about and understand these updated medical guidelines, and should be trained in the observance of universal precautions.

This policy is in accordance with AIDS/HIV Infection Policies for Early Childhood and School Settings, as per the Massachusetts Department of Public Health, Massachusetts Department of Education, and the Massachusetts Board of Education.

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