

# Washington West Supervisory Union Model Policy

## Procedure E9-P

### **E9-P: COMPREHENSIVE HIV PROCEDURES FOR SCHOOLS PRE-K - 12**

#### **Privacy and Confidentiality:**

1. The superintendent shall develop procedures which ensure confidentiality in the maintenance and, where authorized, dissemination of all medically-related documents (see Appendix A).
2. Information regarding HIV status will not be added to a student's permanent educational or health record without written consent.

#### **Health Protections:**

1. All employees shall consistently follow universal precautions guidelines on school property at all times, including at school-sponsored events, on school playgrounds and on school buses (see Appendix C).
2. Students and staff not covered by the Bloodborne Pathogens Standard shall be instructed to avoid contact with potentially infectious materials and blood and shall immediately contact a member or the staff who is covered by and trained in the exposure control plan. When this is not possible, any person providing assistance shall follow universal precautions (see Appendix C).
3. The superintendent or his/her designee shall provide annual training to all staff and students about the hazards of bloodborne pathogens, the recommended operating procedures of universal precautions, the existence of the VOSHA required exposure control plan, individuals or job classes to be notified in order to safely handle or clean up blood or other body fluid spill safely, and the location and use of appropriate protective equipment and first aid devices.
4. The superintendent or his/her designee shall provide training on the recommended operating procedures of universal precautions to teaching substitutes and school volunteers.

#### **Student Health Services:**

1. All students will have access to voluntary, confidential, age and developmentally- appropriate counseling about matters related to HIV infection.
2. School administrators will maintain referral information to facilitate confidential and voluntary student access to HIV counseling, and testing, and other HIV-related services.

3. Public information about resources in the community will be kept available for voluntary student use.

## **HIV/AIDS Prevention Curriculum and Instruction:**

1. The comprehensive health education program will:
  - be provided in accordance with the Vermont Department of Education *Guidelines for the Development of an HIV/AIDS Education Program in Vermont Schools*;
  - be taught at every level, kindergarten through grade 12;
  - be consistent with community standards;
  - include current HIV epidemiology, methods of transmission and prevention, universal precautions, and psycho-social aspects of HIV;
  - be appropriate to students' developmental levels, behaviors, and cultural backgrounds;
  - build knowledge and skills from year to year;
  - stress the benefits of abstinence from sexual activity, alcohol, and other drug use;
  - include accurate information on reducing risk of HIV infection;
  - address students' own concerns;
  - include means for evaluation;
  - be an integral part of a part of a skills-based comprehensive health education program;
  - be taught by well-prepared instructors; and
  - involve parents and families as partners in education.
2. The superintendent shall designate a coordinator to oversee the district's HIV education plans and programs.
3. The school board shall establish a comprehensive health education community advisory council to assist the school board in developing and implementing comprehensive health education including HIV education. The school board shall provide public notice to the community to allow all interested parties to apply for appointment. The school board shall endeavor to appoint members who represent various points of view within the community regarding comprehensive health education.
4. The superintendent or his/her designee shall create a plan to ensure that all school employees, including newly hired staff, receive training regarding current HIV epidemiology, methods of transmission and prevention, universal precautions, psycho-social aspects of HIV, related school policies and procedures, and where appropriate, teaching strategies. The superintendent shall report annually to the school board regarding implementation of this plan.
5. The school district shall provide for parents, families, students and the community, opportunities for education, discussion, and the development of recommendations about a comprehensive HIV prevention education plan (including the promotion of abstinence, condom availability, and non-discrimination of people living with the disease). Educators, administrators, and health professionals shall be involved in such activities.

**Athletics:**

1. All employees shall consistently adhere to infection control guidelines in locker rooms and all play and athletic settings. Rule books will reflect these guidelines. First-aid kits will be on hand at every athletic event.
2. All physical education teachers and athletic program staff will complete an approved first-aid and injury prevention course that includes implementation of infection control guidelines.
3. Student orientation about safety on the playing field will include guidelines for avoiding HIV infection.

**Staff Development:**

1. All school staff members will participate in a planned HIV education program that conveys factual and current information; provides guidance on infection control procedures; informs about current law and state, district, and school policies concerning HIV; assists staff to maintain productive parent and community relations; and includes annual review sessions.
2. As necessary to meet their responsibilities, employees will also receive additional specialized training.

**Policy Dissemination:**

1. On an annual basis, school administrators will notify students, their family members, and school personnel about current policies concerning HIV infection, and provide convenient opportunities to discuss them.

## **Appendices**

### **Appendix A**

Procedures for Maintaining Confidentiality and Sample Written Consent Form

### **Appendix B**

Sample Authorization for Release of Medical Information

### **Appendix C**

Universal Precautions for School Staff

### **Appendix D**

Annotated Legal References

### **Appendix E**

Resources for HIV/AIDS Assistance Information

### Recommended Best Practice Procedures for Maintaining Confidentiality

To maintain an atmosphere of trust with staff members, students, families, and the community, a policy that encourages confidentiality is essential. It is important that people who have the Human Immunodeficiency Virus (HIV) and their families feel certain that their names will not be released against their wishes to others without a need to know. A policy on confidentiality that is strictly enforced will also provide protection to the school district from potentially adverse reactions that might result, including legal action.

To protect the confidentiality of student and/or employee medical records, the school district/supervisory union will comply with federal and state law and follow its Student Records Policy or Employment Records Policy. In addition to compliance with the applicable laws and policies, the following procedures are suggested:

1. All medical information in any way relating to the HIV status of any member of the school community, including written documentation of discussions, telephone conversations, proceedings, and meetings shall be kept in a locked file. Unless an exception applies under federal law, state law, the Student Records Policy or the Employment Records Policy, access to this file shall be granted only to those persons identified in writing by the student or student's parent/guardian. Filing and photocopying of related documents may be performed only by persons named in the written consent.
2. Because of the potential for breach of confidentiality, no medical information shall ever be faxed or e-mailed.
3. Medically-related documents that are to be mailed shall be marked "Confidential." Names of persons mailing documents and those receiving the documents shall be identified on the written consent form by the student or student's parent/guardian, or the applicant/employee.
4. A written consent form shall be completed prior to each disclosure and release of HIV-related information (sample attached).
5. Each disclosure made shall be noted in the student or employee's personal file. The list of such disclosures shall be made available to the student, parent/guardian, or employee upon request.
6. Schools shall comply with Vermont Occupational Safety and Health Administration (VOSHA) rule §1910.20 which concerns maintenance of and access to employee medical records. [Note: §1910.20 is incorporated by reference into §1910.1030 (h).]

**Sample Written Consent Form for Each Release of Confidential HIV\*Related Information**

Confidential HIV-Related Information is any information that a person had an HIV-related test, has HIV infection, HIV-related illness or AIDS\*, or has been potentially exposed to HIV. If you sign this form, HIV-related information can be given to the people listed and for the reasons listed below.

Name and address of person whose HIV-related information can be released:
Name and address of person signing this form (if other than above):
Relationship to person whose HIV-related information may be released:
Name, title or role, and the address of each person who may be given HIV-related information (include names of persons responsible for photocopying and filing confidential information):
1.
2.
3.
4.
Additional names and addresses can be attached or listed on back.)
Information to be provided: (Check as many as apply.)
<input type="checkbox"/> HIV antibody test result <input type="checkbox"/> AIDS diagnosis <input type="checkbox"/> Summarized medical record <input type="checkbox"/> Details of symptoms, signs, and/or diagnostic results (specify: _____) <input type="checkbox"/> Psychiatric, other mental health, and/or developmental evaluation records (specify: _____) <input type="checkbox"/> Names of medical care and/or support service providers (specify: _____) <input type="checkbox"/> Infection status of other family members [Requires written consent] <input type="checkbox"/> Student's instructional program <input type="checkbox"/> Other (specify: _____)
Specific purpose(s) for release of HIV-related information
Time during which release of information is authorized: (A specific time must be noted for each single incidence of release of HIV-related information. Use a new form for each incident.)
From: _____ To: _____

Any disclosure of information not meeting the conditions listed above is expressly prohibited. Disclosure to any other persons than those listed above requires my informed, written consent.

Signature \_\_\_\_\_ Date \_\_\_\_\_

\*Human Immunodeficiency Virus (HIV) that causes Acquired Immune Deficiency Syndrome (AIDS)

Sample Authorization for Release of Medical Information

Date: \_\_\_\_\_

To: Primary Care Provider

\_\_\_\_\_  
(name & address)  
\_\_\_\_\_  
\_\_\_\_\_

From: Parent/Guardian

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please send information about my child \_\_\_\_\_ whose  
date of birth is \_\_\_\_\_ to:

Health Services Office  
Anywhere Elementary School  
123 School Street  
Anywhere, US 12345

Please send all pertinent information regarding

\_\_\_\_\_

Signature of  
Parent/Guardian:

\_\_\_\_\_



## Universal Precautions for School Staff and Independent Contractors Bloodborne Pathogens • Significant Contagious Disease

### Bloodborne Pathogens

Research shows that the risk of getting a significant contagious disease in a school setting is extremely small. However, school staff and contracted personnel in the school need to decrease the possibility of exposure to bloodborne pathogens.

Significant contagious disease (SCD) includes cytomegalovirus (CMV), hepatitis B virus (HBV) and human immunodeficiency virus (HIV) infections. The local board of health or the state health officer may determine that other diseases are significant contagious diseases<sup>1</sup>

“Universal Precautions” means protecting oneself from exposure to blood or body fluids through the use of latex gloves\*\*, masks or eye goggles; cleaning blood and body fluid spills with soap and bleach solution and water; and disinfecting and incinerating or decontaminating infected waste before disposing in a sanitary landfill.<sup>1</sup>

<sup>1</sup> North Dakota Administrative Rules,  
Sections 33-06-05.1-01, 33-06-05-02, 33-06-05.1-03

### None of these are Modes of Transmission of Bloodborne Pathogens

- Sharing Restrooms
- Bathroom Fixtures
- Drinking Fountains
- Hugging
- Eating with Carriers
- Mosquitoes
- Working & Studying with Carriers
- Playing with Carriers
- Swimming Pools
- Shaking Hands
- Eating Food Prepared by Carriers

### Modes of Transmission

"The two common methods of spreading HIV are having sex with an infected individual and using contaminated needles to inject drugs." (Surgeon General's Report to the American Public on HIV Infection and AIDS)

## Universal Precautions in the School Setting

Reduce the risk of exposure to bloodborne pathogens by using universal precautions to prevent contact with blood and body fluids.\*

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### BEGIN BY ATTENDING TO THE INJURED PERSON:

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- Whenever blood and body fluids are present, a barrier (latex rubber gloves\*\*, thick layer of paper towels, or cloth) should be used to minimize exposure of the attending person while the injury is cleansed and/or dressed.
- Soiled clothes of the injured person must be bagged to be sent home.
- Place waste in a plastic bag for disposal.
- Remove gloves and dispose in plastic bag.
- Thoroughly wash hands with soap.

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### CLEAN AND DISINFECT ENVIRONMENTAL SURFACES:

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- Whenever cleaning and disinfecting environmental surfaces in which blood and body fluids are present, a barrier (rubber utility gloves durable enough to withstand environmental cleaning and disinfecting, thick layer of paper towels, or cloth) should be placed between the blood and attending person.
- Use disposable paper towels or other disposable materials to remove blood and body fluids.
- Disinfect the affected area(s) and cleaning tools with a commercial tuberculocidal disinfectant (mixed according to manufacturer's specifications) or bleach solution (approximately 1/4 cup common household bleach per gallon of tap water, mixed fresh daily).<sup>2</sup> The affected surface being disinfected should remain wet for several minutes.
- Secure all waste in plastic bag for disposal.

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### CLEAN UP FOR ATTENDING PERSON:

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- Remove gloves and dispose and secure in a plastic bag.
- Immediately apply soap. Thoroughly wash hands with soap by rubbing hands together (avoiding scrubbing hands). Pay particular attention to finger tips, nails and jewelry. Rinse with fingers pointing downward.
- If running water and soap are not immediately available, a waterless antiseptic cleaner or moist towelette may be used until hands can be thoroughly washed (use of antiseptic cleaner or towelette is NOT a substitute for hand washing.)
- WASH HANDS AS SOON AS POSSIBLE.

\* Body fluids that contain blood.

\*\* Non-latex gloves should be available for any staff member who has a known latex allergy.

## Annotated Legal References

1. 1 V.S.A §317 (7) and (11) - Subsections (7) and (11) are two exceptions to the Vermont law requiring disclosure of public records. Subsection (7) deals with medical records of employees and subsection (11) deals with student records at public schools.
2. Section 504 of the Rehabilitation Act (29 U.S.C. §794) - This federal law (popularly known as "Section 504") prohibits discrimination against persons with disabilities by entities receiving federal funds.
3. 18 V.S.A. §112 (7) - This Vermont public health law prohibits school districts from requiring HIV testing of any applicant, or prospective or current students and prohibits discrimination against an applicant, or prospective or current student on the ground that the person has tested HIV positive.
4. 21 V.S.A. §495(a)(6) and (7) - These provisions prohibit employers, employment agencies, labor organizations and persons seeking employees from discriminating against persons who have a positive test result on an HIV-related blood test and from requiring employees or prospective employees to take an HIV-related blood test as a condition of employment, membership, classification, placement or referral.
5. Individuals with Disabilities Education Act (20 U.S.C. §1400, et seq.) - This federal law (popularly known as "IDEA" or "P.L. 94-142") requires states and school districts to provide special education and related services to eligible students with disabilities.
6. Title VI, Civil Rights Act of 1964 as amended by the Equal Employment Act of 1972 (42 U.S.C. §§2000d and 2000e) - These federal provisions authorize enforcement of Section 504 through the federal courts by clarifying that 11<sup>th</sup> Amendment immunity is unavailable in such cases and makes available administrative remedies to aggrieved parties. Further, these provisions provide the enforcement mechanisms for violations of the Americans with Disabilities Act.
7. Americans with Disabilities Act (42 U.S.C. §12101, et seq.) - This federal law (popularly known as the "ADA") prohibits discrimination in, among other areas, employment and education on the basis of a disability.
8. 16 V.S.A. §131, et seq. and 16 V.S.A. §906 - These Vermont laws require each public and independent school to provide students with a minimum course of study in "comprehensive health education," including education on "HIV infection, other sexually transmitted diseases, as well as other communicable diseases, and the prevention of disease." Additionally, these laws permit the appointment of a community advisory council to assist school boards in developing and implementing comprehensive health education programs.
9. Occupational Safety and Health Act of 1970 - This federal law (popularly known nationally as "OSHA" and in Vermont as "VOSHA") requires safe working conditions in places of employment. In particular, 29 U.S.C. §§653, 655, and 657 form the basis for the issuance of OSHA regulations on dealing with bloodborne pathogens in the workplace.
10. Occupational Exposure to Bloodborne Pathogens Standard (29 C.F.R. §1910.1030) - This federal regulation requires employers to develop and maintain a written Exposure Control Plan concerning bloodborne pathogens and requires the taking of "universal precautions."
11. 21 V.S.A. §§201 and 224 - These state statutes make Vermont law on Occupational Safety and Health consistent with the federal Occupational Safety and Health Act of 1970 (see paragraph #9 above).
12. 20 U.S.C. §1232(g) The Family Education Rights and Privacy Act, 1974 (FERPA) protects the privacy of students and parents.

## Resources for HIV/AIDS Assistance and Information

## State Resources

Vermont Department of Education  
**(802) 828-5151**

For local assistance, contact the Health Education Resource Center nearest you:

Brattleboro - **(802) 254-4511**

South Burlington - **(802) 864-4789**

St. Johnsbury - **(802) 748-8912**

Rutland - **(802) 775-4314**

Vermont Department of Health (Hotline)

**800-882-AIDS**

The Hotline provides information and referral about all HIV-related issues.

Vermont Occupational Safety and Health Administration (VOSHA)

**800-640-0601**

A division of the Vermont Department of Health that supports and regulates workplace safety

## American Red Cross Vermont Chapters

Serves all groups with a wide variety of informational resources available at low or no cost, including videos, curricula, and public health materials. Speakers and trainings on the following subjects are also available. Subjects covered include: HIV transmission and prevention, AIDS in the workplace, confidentiality, universal precautions, bloodborne pathogens and exposure control planning, and first aid.

- Green Mountain – **800-288-3554** (serving Southern Vermont)
- Northern Vermont - **800-660-9130**
- Central Vermont – **(802) 773-9159**

## AIDS Service Organizations

These organizations may provide some of the following services: educational programs and training, speaker's bureaus, support and services for people affected by HIV/AIDS; and/or community advocacy. Contact the organization closest to you.

A Community Resource Network (ACORN)  
serving Windsor and Orange Counties  
**(603) 448-8887 or 800-816-2220**

Comprehensive Care Clinic  
Northeast Vermont Regional Medical Center  
serving Caledonia, Essex and Orleans Counties  
**(802) 751-7603** (St. Johnsbury)

Bennington Area AIDS Project  
serving Bennington County  
**800-845-AIDS (2437)**

AIDS Project of Southern Vermont  
serving Windham and Southern Counties  
**(802) 254-4444**

Vermont C.A.R.E.S.  
serving Chittenden, Addison, Rutland, Lamoille, Washington, Franklin, and Grand Isle Counties  
**(802) 863-AIDS (2437)** (office and general hotline)

Vermont People With AIDS (PWA) Coalition  
**800-698-8792 or (802) 229-5754**  
The Coalition is a statewide organization of and for people living with HIV. The Coalition frequently provides HIV+ speakers for schools.