

### **Procedures – Student with AIDS**

1. When a child with AIDS is reported, the Health Department will immediately request the parents or guardians, if they wish the child to continue to receive an education, to notify the local School District Superintendent. The local health officer will issue an order to exclude the child from school until the School Superintendent has been notified and an educational program planned for the child.
2. The Superintendent will convene a planning team that will include the child's parents or guardians, the child's physician, the District school health nurse, the local public health official, the building principal and teacher.

The planning team will meet to consider whether special measures are necessary for continuing the education of the child and will make recommendations to the Board of Education through the District Superintendent. The recommendations should be based on the behavior, neurological development and physical condition of the child and the expected type of interaction with others in the school setting.

3. In general, it is expected that HIV infected school-aged children (K–12) will be able to attend school without restriction. In general, it is expected that until more is known regarding the degree of risk, HIV infected children under the age of 5 will face some restriction of contact with other children in school and day care settings.
4. For some neurologically disabled children who lack control of secretions or who display behaviors such as biting and those children who have uncoverable, oozing lesions, a more restricted environment is advisable until more is known about transmission for such individuals. Such children infected with HIV should be cared for and educated in settings that minimize exposure of other children to blood or body fluids.
5. Strict confidentiality must be maintained in accordance with State and Federal Laws and local School District policies. Knowledge of the child's condition should be shared with others only if the School Superintendent determines it is necessary to do so after receiving recommendations from the team.
6. Care involving exposure to the infected child's body fluids and excrement such as feeding and diaper changing, should be performed by persons who are aware of the child's AIDS status and the modes of possible transmission. In any setting involving a person with AIDS, gloves should be worn and hands should be washed after exposure to blood and body fluids and before caring for another child. Any open lesions on the infected person should be covered.

7. Reevaluation of the child's need for a restricted environment should be done regularly, as well as upon special request by the teacher or principal, for the hygiene practices of the child may improve or deteriorate.
8. All school staff members, including custodians, bus drivers, and secretaries, should be fully informed of these recommendations and basic hygiene practices as part of annual in-service training.

### **UNIVERSAL BLOOD PRECAUTIONS**

Because of the small risk of blood borne Hepatitis B transmission from carriers not known to be infected, and because most HIV infected individuals will not be identifiable, general precautions should be observed by first aid providers in all situations involving exposure to blood. These precautions apply to bleeding injuries of everyone, not just those known or suspected to be infected:

- a) Wear disposable plastic gloves when providing first aid for bleeding injuries.
- b) You should wash your hands immediately after completing the first aid.
- c) Avoid getting blood from an injured child in your mouth or eyes. If such an exposure occurs, rinse the eye or mouth thoroughly with water.
- d) Clean up any spilled blood with soap and water, followed by disinfection with a freshly made solution of one part bleach to ten parts water or an EPA approved disinfectant.
- e) Place blood contaminated items such as gloves, bandages, and paper towels in a plastic bag, tie it closed, and put it in the garbage receptacle.
- f) Report the first aid situation to your supervisor.

The following precautions should be applied in classrooms, particularly those serving disabled individuals. These include:

- a) Sharing of personal toilet articles, such as toothbrushes and razors, should not be permitted.
- b) Skin lesions that may ooze blood or serum should be kept covered with a dressing.
- c) Exchange of saliva by kissing on the mouth, by sharing items which have been mouthed, and by putting fingers in others' mouths should be discouraged.
- d) Environmental surfaces that may be regularly contaminated by student's saliva or other body fluids should be washed daily with soap and water.