



July 29, 2014

TO THE HONORABLE MEMBERS OF THE SCHOOL COMMITTEE:

Approval of Revisions to HIV/AIDS Policy

Recommendation: That the School Committee approve the revised HIV/AIDS Policy as detailed in the attached document.

This is a second reading of this policy.

Description: The attached document is a revision of the school district's Employees with Aids, Superintendent's regulations Concerning AIDS (Acquired Immune Deficiency Syndrome: Staff); AIDS (Acquired Immune Deficiency Syndrome) Resolution; AIDS (Acquired Immune Deficiency Syndrome) School Attendance Policy into a single comprehensive policy. This revised policy is reflective of current school district practices, current medical recommendations regarding HIV/AIDS and is reflective of guidance from the Massachusetts Department of Elementary and Secondary Education on this topic. This proposed revised policy also has been reviewed by the Cambridge Health Alliance's School and Public Health Medical Director and the Clinical Manager of the School Health Program.

Supporting Data: Attached proposed policy

Respectfully submitted,

A handwritten signature in blue ink, appearing to read "Jeffrey M. Young".

Jeffrey M. Young, Ed.D.
Superintendent of Schools

**Cambridge Public Schools
HIV/AIDS Policy**

The Cambridge Public Schools is committed to having a safe and welcoming educational and working environment for its staff and students. The Cambridge Public Schools also strives to protect the health and safety of students and staff as well as other individuals visiting its schools. Additionally, the Cambridge Public Schools works with public health authorities to promote these goals. Consistent with this commitment, the following is the school district's policy with respect to addressing issues related to staff and students who are living with HIV/AIDS.

School Attendance and Participation in School Activities By Children Who Are Living With HIV/AIDS

Children living with HIV/AIDS who are residents of the City of Cambridge are entitled to the same rights and privileges related to attendance and participation in education within the Cambridge Public Schools as other children who are residents of the City of Cambridge, including without limitation, participation in school-sponsored extracurricular activities, physical education classes, athletic programs, competitive sports, and recess and/or other physical activities. As the risk of HIV transmission in school is minimal, there is no reason to exclude or put conditions on a student living with HIV/AIDS. In accordance with the school district's process for the development of 504 Accommodation Plans for students, school staff will, if necessary, put in place reasonable accommodations for a student living with HIV/AIDS.

School staff shall always strive to maintain a respectful school climate and in accordance with the provisions of the Cambridge Public Schools Anti-Bullying Policy and Policy Against Discrimination and Prohibition Against Sexual Harassment will not allow physical or verbal harassment of any individual or group by another individual or group, including without limitation, taunts directed against a person living with HIV/AIDS, a person perceived as having HIV/AIDS, or a person associated with someone with HIV/AIDS.

Additionally, all school staff must consistently adhere to universal precautions for infection control guidelines in locker rooms and all play and athletic settings. Rulebooks will reflect these guidelines. First-aid kits must be on hand at every athletic event. Also, all physical education teachers and athletic program staff are expected to complete an approved first-aid and injury prevention course that includes implementation of infection control guidelines. Student orientation about safety on the playing field will include guidelines for utilizing universal precautions for infection control.

Employment of Staff Who Are Living With HIV/AIDS

The Cambridge Public Schools does not discriminate on the basis of HIV/AIDS or association with another person with HIV/AIDS. In accordance with the Americans

with Disabilities Act of 1990, an employee with HIV/AIDS is welcome to continue working as long as he or she is able to perform the essential functions of the position with reasonable accommodations, if necessary.

Confidentiality and Privacy

Students or staff are not required to disclose HIV/AIDS status. Additionally, HIV antibody testing is not required for any purpose.

The identity of a student or staff member with HIV/AIDS will not be disclosed without the express written consent of the individual or the express written consent of the individual's parent/guardian if a student under the age of eighteen (18) except where disclosure is otherwise required by law.

If disclosure is made to the school district, the parent/guardian or student (if eighteen (18) or older) or the staff member shall decide which school personnel are allowed to know of the HIV/AIDS status.

Any written information about an individual's HIV/AIDS status shall not be included in the student's educational records, routine school health records or other records accessible to a wide range of staff. HIV/AIDS information on a specific student shall be kept in a separate locked file available to school health staff on a need to know basis. Similarly, any written information about a staff member's HIV/AIDS status shall not be included in records accessible to a wide range of staff but maintained in a separate locked file available to school health staff on a need to know basis.

All employees have a duty to respect the confidentiality of an individual's medical information, whether such information pertains to a student or staff member. Inappropriate disclosure of such information, including without limitation, disclosure of, any knowledge or speculation concerning the HIV/AIDS status of a student or staff member, may subject the individual to disciplinary action, up to and including termination from employment as well as criminal prosecution and/or personal liability for a civil suit. Access to these confidential records is limited to school health staff, emergency medical personnel or those specified in an informed written consent or by court order.

Services to Meet the Needs of Children who have Family Members Living with HIV/AIDS

Students will have access to voluntary, confidential, age and developmentally appropriate counseling about matters related to HIV/AIDS.

School administrators will maintain confidential linkage and referral mechanisms to facilitate voluntary student access to appropriate HIV/AIDS counseling and testing programs, and to other HIV/AIDS-related services as needed.

Public information about resources in the community will be kept available for voluntary, confidential use.

Reduction of Risk of HIV Transmission for Students and Staff at School (Infection Control/Universal Precautions Procedures)

The risk of transmission of HIV in the school setting is extremely low when universal infection control guidelines are followed consistently. These universal precautions will protect against illnesses spread through casual contact (such as the flu and colds) as well as those that are more difficult to acquire (such as Hepatitis B or HIV infection). In this way, schools create a safer school environment and promote better health for everyone.

All employees are required to consistently follow the universal precautions for infection control guidelines as detailed in the Cambridge Public Schools Emergency Management Plan Manual in all school settings and at all times, including on playgrounds and on school buses. Schools will operate according to the standards promulgated by the U.S. OSHA for the prevention of blood-borne infections. Equipment and supplies needed to apply the infection control guidelines will be maintained and kept reasonably accessible. Staff will receive professional development about standard universal precautions and follow these universal precautions with every student or adult.

Additionally, as set forth in the school district's Policy on Administration of Prescription Medications, schools will follow established procedures for administering medications and, as set forth in the school district's Emergency Management Plan Manual, each school will have a plan for managing and responding to medical emergencies at school as well as for communicating and managing communicable disease (e.g. measles or chickenpox) occurrences in the school setting.

Moreover, in accordance with school district policies, a school staff member is expected to alert the principal and school nurse if a student's health condition or behavior presents a reasonable risk of transmitting an infection. If a situation occurs at school in which a person might have been exposed to an infectious agent, such as an instance of blood-to-blood contact, school authorities shall counsel that person (or, if a minor, alert the student's parent/ guardian) to seek appropriate medical evaluation.

Quality and Effectiveness of HIV Prevention Education For Youth

Students will receive education about HIV transmission and prevention of transmission through the school curriculum.

The goals of HIV prevention education are to promote healthful living and discourage the behaviors that can put a young person at risk of acquiring HIV. The educational program will:

- be taught at every level, kindergarten through grade 12;

- use methods demonstrated by sound research to be effective;
- be consistent with community standards;
- follow content guidelines prepared by the Centers for Disease Control and Prevention (CDC);
- be aligned with the Massachusetts Comprehensive Health Curriculum Frameworks;
- be aligned with the National Health Education Standards
- be aligned with the National Sexuality Education Standards
- be appropriate to students' developmental levels, behaviors, and cultural backgrounds;
- build knowledge and skills from year to year;
- stress the benefits of delaying sexual activity, alcohol, and other drug use;
- include specific, clear & accurate information on all the ways to reduce the risk of HIV infection;
- address students' own concerns;
- teach skills of using prevention methods
- include means for evaluation;
- be an integral part of a coordinated school health program (CSHP);
- be taught by well-prepared instructors with adequate support; and
- involve parents and families as partners in education.

Parents/guardians shall have opportunities to preview all HIV prevention curricula and materials, and be provided assistance to discuss HIV infection with their children. If a parent/guardian submits a written request to a principal that a child not receive instruction in sexuality topics at school, the child shall be excused without penalty or stigma.

The school district will endeavor to cooperate with HIV prevention efforts in the community that address out-of-school youth and youth in situations that put them at high risk of acquiring HIV.

Staff Training

All school personnel will receive professional development about HIV transmission and prevention of transmission, guidance on infection control procedures, testing facts and local/state statutes, and confidentiality laws. Additionally, certain employees as determined by the Superintendent of Schools will also receive additional specialized training as appropriate to their positions and responsibilities to address and respond to various issues outlined in this policy.

Accountability

The Superintendent of Schools shall be responsible for development and implementation of administrative guidelines consistent with this policy and ensure the inclusion of information regarding this policy in the school district's *Guide to Policies for Student and Families* and *Guide to Policies for Staff*. The Superintendent or designee

shall be responsible for investigating and responding to any reported violations of this policy.

Periodic Policy Review

The school district will review this policy at least every three years and make any amendments necessary.

Adopted:

File: GBGAA

EMPLOYEES WITH AIDS

The School Committee adopts the following policy with respect to members (teaching, administrative or supporting) who contract AIDS.

Policy

An employee with AIDS shall be allowed to continue to come to work unless the Commissioner of Health of the City of Cambridge determines that his/her condition is a threat to him/herself or others. A person excluded shall be entitled to medical leave, the use of all earned sick leave and to apply subject to Committee-Union agreements, for use of the appropriate sick leave bank. If the condition becomes generally known, staff will respond appropriately and with sensitivity to parent and student concerns. Under these conditions, the Superintendent will appoint members of the Department's staff to help in understanding and responding to the situation.

Additional Recommendations

That the School Committee accept the attached administrative guidelines as, fully consistent with its policy, stated above;

That the School Committee transmit a copy of its policy, the administrative guidelines, and the "Public Health Fact Sheet: AIDS" to all staff members, and

That the policy and guidelines for students be made available to all staff by the principal of each school.

Further, the Superintendent's Office will plan and implement an educational effort about AIDS and the contents of the policy, for parents, staff and students.

Adopted: June 5, 2001

**SUPERINTENDENT'S REGULATIONS CONCERNING AIDS
(ACQUIRED IMMUNE DEFICIENCY SYNDROME): STAFF**

1. INTRODUCTION

The Guidelines and Procedures outlined herein apply to all employees of the Cambridge Public Schools. These Regulations and Procedures shall remain in effect until such time as they are amended as the result of consultation with appropriate state and local public health officials and collective bargaining units.

AIDS (Acquired Immune Deficiency Syndrome) is in the true sense a transmitted and not a communicable disease. In other words, it is spread not by sitting nearby, living in the same household, or working together but by other more direct routes, such as intimate sexual contact, blood transfusions, or intravenous drug abuse.

AIDS is a recent medical problem and information about the disease is constantly being updated. Therefore, these guidelines will be amended to reflect new medical information as well as state or city policies and guidelines as such information becomes available.

2. GENERAL

An employee who has contracted AIDS shall be allowed to come to work unless the Commissioner of Health of the City of Cambridge determines that his or her condition is a threat to himself, herself, or others, and the Commissioner so informs the Superintendent. If an employee is to be excluded from work for this reason, he or she shall be entitled to a personal medical leave as indicated by the contract, recommended by the Superintendent and approved by the School Committee, and should sick leave balances run out, to apply subject to Union agreements in confidence, for additional days under the appropriate sick leave bank entitlement regulations.

Condition Generally Known

If the condition of the staff member or member of an employee's household becomes generally known, the principal and teaching staff will respond to students and parents as they would with any other fatal disease. All information on the policies and regulations should be made available to the parent(s). It may be necessary to schedule a parents' meeting with parents of students in the class and medical authorities including a representative of the Commissioner of Health's Office.

3. Guidelines for Medical Review

Any employee diagnosed as having AIDS or with clinical evidence of infection with the AIDS associated virus (HTLV III) and who is receiving proper medical attention shall be treated the same as with any other chronic illness except as follows.

"An employee with AIDS who believes that his/her condition may be a threat to students, staff, or parents is encouraged to have his/her personal physician contact the office of the Commissioner of Health of the City of Cambridge to review the matter and to verify the degree of threat, if any, and steps which might ameliorate the possibility of accidental transmission.

Adopted: June 5, 2001

File: JLCCA

AIDS (ACQUIRED IMMUNE DEFICIENCY SYNDROME) RESOLUTION

Whereas, there is a great deal of concern in the community about the history, symptoms, and transmissibility of Acquired Immune Deficiency Syndrome (AIDS) and AIDS Related Complex (ARC); and

Whereas, misinformation or lack of knowledge regarding the scope of the disease could result in improper decisions about children's attendance at school; and

Whereas, a comprehensive policy on AIDS and ARC has been developed by the Massachusetts Department of Public Health, which has been adopted by the Massachusetts Department of Education as policy; therefore be it

RESOLVED, that the Massachusetts Medical Society strongly recommends at this time that school systems in the Commonwealth appropriately implement an official policy governing school attendance by children and teachers with Acquired Immune Deficiency Syndrome (AIDS) and AIDS Related Complex (ARC) using the guidelines currently developed by the Massachusetts Department of Public Health.

NOTE: This resolution was adopted by the Massachusetts Medical Society in September 1986.

Adopted: June 5, 2001

**AIDS (ACQUIRED IMMUNE DEFICIENCY SYNDROME)
SCHOOL ATTENDANCE POLICY***

Epidemiological studies show that AIDS is transmitted via sexual contact or blood to blood contact. To date, there is no recorded transmission of AIDS to family members who are non-sexual contacts. This fact is also observed with medical personnel who directly care for and are exposed to AIDS cases. Since there is no evidence of casual transmission by sitting near, living in the same household, or playing together with an individual with AIDS, 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 the 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 which 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.

***NOT INTENDED FOR DAY CARE**

2. The child's personal physician is the primary manager of the child diagnosed as having AIDS or with clinical evidence of infection with the AIDS associated virus (HIV). Management includes acting as the "gate keeper" for the child's attendance at school in accordance with the policy outlined above.
 - A. The child's personal physician, after consultation with the family, is responsible for reporting cases of AIDS to the Massachusetts Department of Public Health's Division of Communicable Disease. The school superintendent will be notified by the child's personal physician and will provide assistance in identifying those educational or health care agents with an absolute need to know.
 - B. Only persons with an absolute need to know should have medical knowledge of a particular student. In individual situations, the superintendent might notify one or more of the following:
 - . Principal
 - . School Nurse
 - . Teacher

- C. Notification should be by a process that would maximally assist patient confidentiality. Ideally, this process should be direct person to person contact.
 - D. 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 #1, 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.
 - E. 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.
- 3. Since the child diagnosed as having AIDS or with clinical evidence of infection with the Aids associated virus (HIV) has a somewhat greater risk of encountering infections in the school setting, the child should be excluded from school if there is an out-break of a threatening communicable disease such as chicken pox or measles until he/she is properly treated (possibly with hyperimmunegamma globulin) and/or the outbreak has no longer become a threat to the child.
 - 4. HIV screening is a blood test for detecting the presence of antibody to the HIV virus. Antibodies are substances produced by white blood cells that help fight infection caused by viruses or bacteria. Testing for HIV antibody is not recommended for any purposes other than to assist the child's personal physicians in a highly selected set of clinical decisions. Results of HIV antibody tests are confidential and should not be reported to schools.
 - 5. Blood or any other body fluids including vomit and fecal or urinary incontinence in any child should be treated cautiously. It is recommended that gloves be worn when cleaning up any body fluids.
 - A. These spills should be disinfected with bleach (one part bleach to ten parts water), or another disinfectant, by pouring the solution around the perimeter of the spill.
 - B. All disposable materials, including gloves, should be discarded into a plastic bag. The mop should be disinfected with the bleach solution described in 5A.
 - C. Persons involved in the clean-up should wash their hands afterward.
 - 6. In-service education of appropriate school personnel should ensure that proper medical and current information about AIDS is available.

Adopted: June 5, 2001