

Educating Students with Chronic Infectious Diseases

The Inter-Lakes School Board adopts the following policy for educating students known to have a chronic infectious disease (e.g., AIDS/ARC, CMV, hepatitis B., herpes simplex) and for ensuring a safe and healthy school environment for all students.

1. All children in the Inter-Lakes School District have a constitutional right to a free, suitable program of educational experiences.
2. As a general rule, a child with a chronic infectious disease will be allowed, with the approval of the child's physician, to attend school in a regular classroom setting and will be considered eligible for all rights, privileges, and services provided by law and existing policy of the Inter-Lakes School District.
3. The school nurse will function as (a) the liaison with the child's physician, (b) the child's advocate in the school (i.e., assist in problem resolution, answer questions) and (c) the coordinator of services provided by other staff.
4. The school will respect the right to privacy of the individual; therefore knowledge that a child has a chronic infectious disease will be confined to those persons with a direct need to know (e.g., principal, school nurse, child's teacher). Those persons will be provided with appropriate information concerning such precautions as may be necessary and should be aware of confidentiality requirements.
5. Based upon individual circumstances, accommodations may be warranted.
6. Under certain circumstances a child with a chronic infectious disease might pose a risk of transmission to others. If any such circumstances exist the school medical advisor, in consultation with the school nurse and the child's physician, must determine whether a risk of transmission exists. If it is determined that risk exists, the student shall be removed from the classroom.
7. A child with a chronic infectious disease may be temporarily removed from the classroom for the reasons stated in #6 until an appropriate school program adjustment can be made, an appropriate alternative education program can be established, or the medical advisor determines that the risk has abated and the child can return to the classroom.
 - a. Removal from the classroom will not be construed as the only response to reduce risk of transmission. School personnel should be flexible in developing alternatives and should attempt to use the least restrictive means to accommodate the child's needs.
 - b. In any case of temporary removal of the student from the school setting, state regulations and school policy regarding homebound instruction will apply.
8. Each removal of a child with a chronic infectious disease from normal school attendance will be reviewed by the school medical advisor in consultation with the student's physician at least once every month to determine whether the condition precipitating the removal has changed.
9. A child with a chronic infectious disease may need to be removed from the classroom for his/her own protection when other communicable diseases (e.g., measles or chicken pox) are occurring in the school population. This decision will be made by the child's physician and parent/guardian in consultation with the school nurse and/or the school medical advisor.

10. All staff should use the following routine and standard procedures to clean up after a child who has an accident or injury at school. Blood or other body fluids emanating from any child, including ones known to have a chronic infectious disease should be treated cautiously. Gloves should be worn when cleaning up blood spills. These spills should be disinfected with either bleach or another disinfectant, and persons coming in contact with them should wash their hands afterwards. Items soaked with blood or other body fluids should be placed in leak-proof bags for washing or further disposition. Similar procedures are recommended for dealing with vomitus and fecal or urinary incontinence in any child. Hand washing after contact with a school child is routinely recommended only if physical contact has been made with the child's blood or body fluids including saliva.

Legal References:

RSA 200:27, School Health Services
RSA 200:29, School Nurse
RSA 200:31, school Health Personnel
RSA 326-B, Nurse Practice Act
NH Code of Administrative Rules, Section Ed 306.12 (b), School Health Services

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