POSSIBLE EXPOSURE TO VIRAL INFECTIONS

Upon notification by a School Board employee who believes he/she has been involved in a possible exposure-prone incident which may have exposed the employee to the blood or body fluids of a student, the superintendent shall contact the local health director who, upon immediate investigation of the incident, shall determine if a potentially harmful exposure has occurred and make recommendations based upon all information available to him/her, regarding how the employee can reduce any risks from such exposure.

The superintendent shall share these recommendations with the School Board employee.

The superintendent and the School Board employee shall not divulge any information provided by the local health director regarding the student involved except as described below. The information provided by the local health director shall be subject to any applicable confidentiality requirements set forth in Va. Code § 32.1-35.

Whenever any School Board employee is directly exposed to body fluids of any person in a manner which may, according to the current guidelines of the Centers for Disease Control and Prevention, transmit human immunodeficiency virus or hepatitis B or C viruses, the person whose body fluids were involved in the exposure shall be deemed to have consented to testing for infection with human immunodeficiency virus or hepatitis B or C viruses. Such person shall also be deemed to have consented to the release of such test results to the School Board employee who was exposed. In other than emergency situations, it shall be the responsibility of the School Board employee to inform the person of this provision prior to the contact that creates a risk of such exposure.

If the person whose blood specimen is sought for testing is a minor, and that minor refuses to provide such specimen, consent for obtaining such specimen shall be obtained from the parent, guardian, or person standing in loco parentis of such minor prior to initiating such testing. If the parent or guardian or person standing in loco parentis withholds such consent, or is not reasonably available, the person potentially exposed to the human immunodeficiency virus or hepatitis B or C viruses, or the employer of such person may petition the juvenile and domestic relations district court in the county or city where the minor resides or resided or, in the case of a nonresident, the county or city where the School Board has its principal office, for an order requiring the minor to provide a blood specimen or to submit to testing and to disclose the test results in accordance with this policy.

Whenever any person is directly exposed to the body fluids of a School Board employee in a manner that may, according to the then current guidelines of the Centers for Disease Control and Prevention, transmit human immunodeficiency virus or hepatitis B or C viruses, the School Board employee whose body fluids were involved in the exposure shall be deemed to have consented to testing for infection with human immunodeficiency virus or hepatitis B or C viruses. The School Board employee shall also be deemed to have consented to the release of such test results to the person.
Except if the person to be tested is a minor, if the person whose blood specimen is sought for testing refuses to provide such specimen, any person potentially exposed to the human immunodeficiency virus or hepatitis B or C viruses, or the employer of such person, may petition the general district court of the county or city in which the person whose specimen is sought resides or resided, or, in the case of a nonresident, the county or city where the School Board has its principal office, for an order requiring the person to provide a blood specimen or to submit to testing and to disclose the test results in accordance with this section. At any hearing before the court, the person whose specimen is sought or his counsel may appear. The court shall be advised by the State Health Commissioner or his designee prior to entering any testing order. If a testing order is issued, both the petitioner and the person from whom the blood specimen is sought shall receive counseling and opportunity for face-to-face disclosure of any test results by a licensed practitioner or trained counselor.

For all persons to be tested, the School Board shall require a release for blood testing to be signed. For students under the age of 18, the release must be signed by a parent or legal guardian. Students age 14 and older must also sign the release. Students age 18 and older do not need a signature of parent or legal guardian. In addition, medical information of a student age 18 and older shall not be released to anyone but the student and other involved person in the blood exposure in accordance with HIPAA guidelines.

Adopted: September 25, 2014


Cross Refs: GBEAB Blood Borne Infectious or Contagious Diseases
JHCC Communicable Disease
PROCEDURES FOR POSSIBLE EXPOSURE TO VIRAL INFECTIONS

The following procedures will be utilized to ensure all persons potentially affected by policy EBAB are informed of the policy and the processes surrounding it. The Albemarle County School Board intends for policy EBAB to apply to students and employees during school and school related activities.

1. The superintendent or his/her designee will notify parents of ACPS students and students age 14 and older about Policy EBAB at the start of each school year. This notification will be included in the packet of required documents along with a receipt of notification to be signed by the student’s parent or legal guardian and the student if age 14 and above, then returned to the school division offices.

2. The superintendent or his/her designee will notify employees of ACPS about Policy EBAB during employee orientation and annual training activities. This training will include a verification of the employee’s participation and acknowledgement of notification.

3. In the event of an exposure to bodily fluid, the superintendent or his/her designee will speak to the parent / legal guardian of the student(s) who are under the age of 18 and also to student and / or the employee(s) involved instructing them on the process for being tested for viral infections based on the current protocols of the Centers for Disease Control.

4. When a blood test is required for an exposure incident, the form included with policy EBAB will be used. Signatures are required for students age 14 and older, parents / legal guardians of students under the age of 18 and employees who are to be tested. Each person to be tested must be documented on a separate form, and a copy must be sent to the superintendent’s office.

5. The results of these tests must be disclosed to the involved persons. The school division will provide initial counseling and the opportunity for face-to-face disclosure of any test results by a licensed practitioner or trained counselor.

6. The payment for costs of required testing and counseling will be paid by ACPS, not by the student, parent or employee.
RELEASE FOR BLOOD TESTING

School________________________________________________________________________

Address_______________________________________________________________________

Phone _________________________________________________________________________

Pursuant to Albemarle County School Board Policy EBAB – Possible Exposure to Viral Infections, the person indicated must submit to a blood test for blood borne pathogens. In addition, the results of the blood test must be disclosed to involved persons.

The undersigned further relieves the Albemarle County School Board, its employees, and agents of any legal liability that might pertain to them for any injury, damage, loss or accident which may be occasioned through the testing and agree that the Albemarle County School Board, its employees, and agents shall not be liable for the consequences..

Name_________________________________________________________________________

Address_______________________________________________________________________

Phone_________________________________________________________________________

Date _________________________________________________________________________

Student or employee?___________________________________________________________

If student – DOB_________________________ and current age__________________________

If student is age 14 or older, student’s signature:__________________________

If student is under age 18, parent’s / legal guardian’s signature:_____________________

If employee, employee’s signature:______________________________________________