

PLAINFIELD PUBLIC SCHOOLS**EDUCATING STUDENTS WITH INFECTIOUS – COMMUNICABLE DISEASES**

The following regulation was devised and adopted for educating students diagnosed as having chronic infectious disease (for example AIDS/HIV, H1N1, Hepatitis B, Venereal Diseases) and for insuring a safe and healthy school environment for all students.

1. All students in Connecticut have a constitutional right to a free, suitable program of educational experiences.
2. The school will respect the right to privacy of the individual. Only when there is a serious risk of transmission as determined by the child's physician or the school medical advisor, will this information be shared. The Confidential Medical Information form shall be completed when the parent/guardian or student over 18 years of age reports a chronic infectious disease.
3. The coordinator of health services for the school system will convene the health advisory committee. Membership is to include: The coordinator of health services; school medical advisor; student's physician; director of Public Health Services; the supervisor of pupil personnel services and the student's principal. See addendum attached for names of personnel.
4. The advisory committee will review the student's medical data, assess suitability of school placement and make a recommendation to the Superintendent of Schools.
5. If exclusion from regular school placement is recommended, the Superintendent will notify the parent. When necessary, the Planning and Placement Team process will be used to plan an alternative placement based on the student's individual needs.
6. If it is determined that an immediate risk exists, the student will be removed from the classroom.
7. A student with chronic infectious disease, or those who would be considered immunodeficient, may need to be removed from the classroom for his/her own protection when cases of measles or chicken pox, etc. occur in the school. A decision will be made by the appropriate building administrator responsible for the student's education plan, in consultation with the school nurse and/or the school medical advisor and the student's physician and parent/guardian.
8. If in-school placement is recommended, the building administrator places the matter before the Planning and Placement Team which will be used to plan an appropriate educational program based on the student's individual needs.
9. Periodic review (or when the need may arise) of all placements, or exclusions of students with AIDS/or any other infectious disease will take place by the health advisory committee if the student is assigned to in-school placement. The coordinator of school health services will be responsible to implement and monitor the reviews.

10. Parents may appeal to the Superintendent who will take the matter to the Board of Education.
11. The school nurse will function as a liaison with the student's physician.
12. Staff working directly with the student will be instructed by the school nurse regarding any precautions as may be necessary.
13. Routine procedures will be established by the coordinator of School Health Services for the handling of body fluids in school. Guidelines recommended by the State Department of Health Services, Division of Epidemiology, shall be used.
14. The following routines and standard procedures are mandatory for cleaning up after any 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 carefully wash their hands. Blood soaked items should be placed in leak-proof bags for washing or further disposition. Similar procedures are recommended for dealing with vomitus, fecal or urinary incontinence in any child. Hand washing after contact with a child is routinely recommended.

CONFIDENTIAL MEDICAL INFORMATION

The Confidential Medical Disclosure form shall be utilized in the event disclosure is obtained from a parent/guardian or a student of legal age.

If disclosure is made orally, the written form must be completed within ten (10) days.

The signed disclosure form shall be filed in the Confidential Health File maintained in the school nurse's office. Access shall be limited to the person(s) listed on the written disclosure form.

The following shall be recorded on the regular school cumulative health record: "Additional information is listed in the Confidential Health File. Access requires specific consent".

When the school health record is transferred to another district, specific consent must be obtained for release of the Confidential Health File.

Adopted: 1991
Revised: 10/14/92