

**BOARD OF TRUSTEES  
CARSON CITY SCHOOL DISTRICT**

**REGULATION No. 536  
STUDENTS**

**HUMAN IMMUNODEFICIENCY VIRUS (HIV) OR  
ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS)**

**Identification of Students**

Any student with HIV/AIDS generally will be identified by the school district only when the District receives direct information from the student or his/her parent/guardian about his/her medical diagnosis.

To encourage such disclosure, the District will endeavor to treat such students in a fair, nondiscriminatory, and confidential manner consistent with the District's legal obligations.

All information about such students will be reported to the Principal and School Nurse, who will be the school officials responsible for coordinating the placement decision. For purposes of these procedures, the Principal and School Nurse will be referred to as the "school officers."

**Placement Decisions**

HIV/AIDS is not transmitted casually; therefore, it is not itself a reason to remove a student from school. The school officers will determine whether the student who has HIV/AIDS has a secondary infection such as active tuberculosis that constitutes a recognized risk of transmission in the school setting. This is a medical question which the school officers will answer by consulting with the infected student's physician, a qualified public health official who is responsible for such determinations, and the infected student's parent/guardian.

If there is no secondary infection that constitutes a medically-recognized risk or transmission in the school setting, the infected student's educational program will not be altered.

**Medical Plan**

If there is a secondary infection that constitutes a medically-recognized risk of transmission in the school setting, an individually tailored plan for the student will be developed. Additional persons may be consulted if this is essential for gaining additional information, but the infected student's parent/guardian (unless the student is 18 years of age) must approve the notification of any additional persons who would know the identity of the infected student. If an individually-tailored plan is necessary, it must have minimal impact on the student's education. Utmost confidentiality will be observed throughout this process.

The school officers will review the case annually or as needed with the infected student or the student's parent/guardian and the medical advisors described above.

**Educational Plan**

Students, whose health is impaired by the HIV/AIDS virus and because of that impairment need special education and related services, are also covered under the Individuals with Disabilities

## **REGULATION No. 536 - CONTINUED**

Education Act (IDEA), which guarantees a free appropriate public education to individuals with disabilities.

Under the IDEA, placement decisions must be made by a team of persons knowledgeable about the student and be based on medical and educational data. In the development of an individualized educational program, school personnel should consider expanding the staffing committee to include the student's physician and a public health official to serve in an advisory capacity.

The fact that a student is HIV positive or has AIDS will not be disclosed on the student's individual educational program nor will it be disclosed to members of the staffing committee unless the school officers in consultation with the infected student and parent/guardian, as appropriate, determines that such disclosure is necessary to develop procedures to address the student's medical condition, to provide medical treatment, or to ensure the safety of other people. These precautions also shall be observed in the case of an HIV positive student who is referred for special education and staffing for reasons unrelated to HIV infection.

Placement decisions must be based on the education needs of the student and reasonable medical judgments, given the current state of medical knowledge about risks to the student and others. For example, restricted placement may be advisable for students who lack control of bodily secretions, are at substantial risk of contracting serious illness or have open wounds, are likely to engage in behavior such as biting, or that may be an endangerment to other students. Under the IDEA, the student's education program must be reviewed regularly to determine whether a change to the student's placement is required.

### Confidentiality

All information gained by the District including the identity of the student will be treated as confidential. Special precautions will be taken to protect information regarding a student's health condition in order to prevent instances of disclosure that may invade a student's personal privacy.

Persons who may know the identity of a student with HIV/AIDS are those who with the infected student or his parent/guardian will determine whether the student has a secondary infection that constitutes a medically-recognized risk of transmission in the school setting. They are the school officers, the student's personal physician, and a public health official, who may be able to study the facts of the case sufficiently without needing to know the identity of the student to make a decision.

All medical information and written documentation of discussions, telephone conversations, proceedings and meetings will be kept by the school health office in a locked file. Access to this file will be granted only to those persons who have the written consent of the infected student or his parent/guardian.

To further protect confidentiality, names will not be used in documents except when this is essential. Any document containing the name or any other information that would reveal the identity of the infected student will not be shared with any person, not even for the purposes of word processing or reproduction.

## **REGULATION No. 536 - CONTINUED**

### Responsibilities

1. All District Employees  
When any District employee, classified or certified, is made aware of any childhood case of HIV/AIDS infection at a local school, this information should be reported immediately to the responsible Principal and the School Nurse.
2. School Officers (Principal and School Nurse)
  - a. Report cases of HIV/AIDS infection to District's physician/consultant, and
  - b. With parent/guardian permission confers with the student's physician
3. District Physician/Consultant
  - a. Carson Health & Human Services acts as the CCSD physician/consultant
  - b. Investigates reported or suspected cases of HIV/AIDS, and
  - c. Upon verification that a student has HIV/AIDS, confers with the student's personal physician and the student's parent or guardian
4. School Nurse
  - a. With the District's physician/consultant, acts as liaison with the student's physician;
  - b. Develops a medical plan for the HIV/AIDS affected student;
  - c. Monitors affected student's medical and placement status (this monitoring periodically assesses any change in health status that may determine school attendance);
  - d. Provides information about HIV/AIDS to appropriate school staff;
  - e. Provides health and medically related services to students with HIV/AIDS, in accordance with established nursing procedures; and
  - f. If any case of measles, chickenpox, or other illness that would present a hazard to the affected student should occur in the local school population, reports to the student's physician and to the District's physician/consultant as directed.
5. Release of Information.
  - a. Information released to the School District concerning the diagnosis of HIV/AIDS should be forwarded directly to the District's physician/consultant
  - b. Confidential records concerning HIV/AIDS and related medical problems shall be kept by the school health office in a locked file.
  - c. Release of information regarding student's condition shall only be allowed under the District's HIPAA & FERPA Policies.

Adopted: February 24, 2015