



### **LIABILITY AND NON-DISCRIMINATION**

Students infected with HIV shall not be denied enrollment in school on the sole basis of the HIV status. A student with HIV infection has the same right to attend school and receive services and shall be subject to the same rules and policies as other students. HIV infection shall not factor into decisions concerning class assignments, privileges, or participation in any school-sponsored activity.

Students living with HIV/AIDS who are capable of vigorous physical activity shall not be restricted from recreational sports, intramural, or interscholastic athletic participation. School authorities shall make reasonable accommodations to allow students living with HIV infection to participate in school-sponsored physical activities.

Mandatory screening for communicable diseases not spread by casual everyday contact, such as HIV infection, shall not be a condition for school entry or attendance. No student shall be required to have a blood test or medical consultation to determine HIV status.

### **ADMINISTRATIVE RESPONSIBILITIES**

#### *Disclosure*

A student or student's parent/guardian may choose to report her/his HIV status to school personnel. Upon a student's disclosure of HIV status, the Director of Schools shall initiate procedures which will ensure privacy and maintenance of all medically-related documents. All health records and other documents which reference a person's HIV status shall be secured by appropriate safeguards intended to limit access to these confidential records. Information regarding HIV status shall not be added to a student's permanent educational or health record without written consent.

The Director of Schools shall convene an evaluation team composed of the student's parents/guardians, the student's physician if s/he elects to attend, a physician or nurse from the Metro Health Department and a representative of the local education agency as designated by the Director of Schools. The evaluation team shall evaluate and review the student's health status relative to attending school.

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Annually

## **Acquired Immune Deficiency Syndrome SP 6.135**

The Director of Schools, parents/guardians, and the treating physician will develop an appropriate educational program in the least restrictive environment which is medically, legally, and educationally sound. In determining the educational placement of a student known to be infected with HIV, school authorities shall follow established policies and procedures for students with disabilities. School authorities shall reassess placement if there is a change in the student's need for accommodations or services.

The Director of Schools shall be responsible for requesting medical records from the parents/guardians and a statement from the student's physician regarding health status of the student reported to have HIV/AIDS. In addition, the Director of Schools will gather information regarding the student's cumulative school record. These records will be reviewed by the evaluation team.

The evaluation team shall assume responsibility for determining when a student's medical condition warrants the student's removal from the classroom. For any child determined as warranting removal from the classroom due to medical reasons, the school shall be responsible for determining the appropriate educational program for the child. The parents/guardians shall be included as part of the local decision-making process. Because HIV/AIDS infection is a progressive disease, semi-annual medical and educational monitoring will be conducted by the evaluation team using the latest public health information.

### **CONFIDENTIALITY**

Students are not required to disclose HIV infection to anyone in the education system. In accordance with HIPPA and FERPA guidelines, no information regarding a student's HIV status shall ever be disclosed to any individual or organization without a court order or the informed, written, signed, and dated consent of the person with HIV infection (or the parent or guardian of a legal minor). The written consent must specify the recipient of the information and the purpose of the disclosure. Information pertaining to a person's HIV status shall not be faxed. HIV-related information is confidential regardless of the source, including whether the information is obtained intentionally or unintentionally from the person with HIV/AIDS or through oral, written, or electronic communication from another source. Disclosure of HIV-related information could result in a loss of privacy, harassment, and discrimination. Unauthorized disclosure by employees is cause for disciplinary action, up to and including dismissal, and could lead to individual liability in addition to criminal or civil penalties against LEAs and their personnel.

Under no circumstances shall information identifying a student with HIV/AIDS be released to the public.

### **APPROPRIATE ALTERNATIVE EDUCATION PROGRAMS**

If a change in an HIV infected student's educational program becomes necessary (due to a secondary infection that constitutes a medically recognized risk of HIV transmission in the school setting or deteriorating health of the student) the Director of Schools, parents/guardians, and the treating physician will develop an appropriate educational program in the least restrictive environment which is legally and educationally sound. If the

HIV infected student is receiving special education services, these services will be in agreement with established policies.  
Reassessment of educational placement will be conducted semi-annually or as is necessary.

## **CURRICULUM**

### *HIV Prevention Education:*

The goals of HIV prevention education are to promote healthful living and discourage the behaviors that put people at risk of acquiring HIV. All Tennessee LEAs shall provide age-appropriate, ongoing HIV prevention education instruction in accordance with the Tennessee Department of Education's Lifetime Wellness curriculum, the K-8 Healthful Living curriculum, and the Family Life Education Law of 1989. The HIV prevention education program shall:

- Be taught at every level, kindergarten through grade twelve;
- Follow content guidelines prepared by the Centers for Disease Control and Prevention (CDC);
- Build knowledge and skills from year to year;
- Be appropriate to students' developmental levels, behaviors, and cultural backgrounds;
- Include accurate information on reducing the risk of HIV infection;
- Stress the benefits of abstinence from sexual activity, alcohol, and other drug use;
- Address student's own concerns about HIV transmission;
- Be taught by well-prepared instructors with adequate resources and support;
- Be consistent with community standards; and
- Involve parents and families as partners in communication.

Parents and guardians shall have convenient opportunities to preview all HIV prevention curricula and materials in accordance with the provisions of the Family Life Education Law of 1989.

## **References/Authority**

Family Life Education Law of 1989