

COMMUNICABLE/INFECTIOUS DISEASE FULL EXCLUSION GUIDELINES
AIDS - Specific Guidelines

1. When a child under the age of 21 is reported to have Acquired Immunodeficiency Syndrome (AIDS), the county health department or State Health Division will request the parent(s) or guardian(s), if education services are requested, to notify the local school district superintendent. The local health officer or State Health Division administrator will issue an order to exclude the child from school until the superintendent has been notified and an educational plan has been developed.
2. A planning team which consists of the child's parent(s) or guardian(s), the child's physician, representatives of the State Health Division and county health department, representatives of the Department of Education, the district superintendent or designee, the special education director or designee, one of the child's classroom teachers and such other persons as deemed appropriate by the superintendent will be convened.
3. The child will be referred for consideration of special educational eligibility. All pertinent health and academic records will be assembled and a multidisciplinary team will be convened to determine eligibility and placement.
4. The multidisciplinary team will make a decision regarding eligibility and, if appropriate, develop an individualized education program to meet the educational needs of the child, and will determine educational placement based on that document. Members of the planning team should assist with the placement decision.
5. If the student is not eligible for special education, the planning team will make a decision regarding the type of educational setting for children with AIDS based on behavior, neurologic development, physical condition of the child and the expected type of integration with others in that setting.
6. Attendance in public school is an option for AIDS infected school-aged (K-12) children. For some neurologically disabled children who lack control of their body secretions or who display behaviors such as biting, and those children who have un-coverable, oozing lesions, a more restricted setting is advisable until more is known about transmission from such individuals.
7. Strict confidentiality should be maintained in accordance with state and federal laws and district policies. Knowledge of the child's condition should be shared with others only if the superintendent deems it necessary to do so after receiving recommendations from the team.
8. Reevaluation of the child's individual education program and placement should be done quarterly, as well as upon request by the parent(s), teacher or principal to review the needs and hygiene practices of the child, as they may improve or deteriorate.