

## BUTLER COUNTY CHILDREN SERVICES

POLICY NO.: 18.1	SUBJECT: <b>HIV/AIDS</b>
	EFFECTIVE DATE: 3/10
	REVISION DATE:
	REVIEW DATE:

**PURPOSE:** To describe the manner and method of handling the issues raised when clients (children and adults) are infected with Human Immunodeficiency Virus (HIV). HIV infection means AIDS, AIDS-related Complex, or the presence of HIV antibody.

### POLICY:

Butler County Children Services is committed to providing adequate, appropriate services to every client, whether adult or child, and to treating every client with dignity and respect including clients who are infected with the Human Immunodeficiency Virus (HIV).

#### 1. Clients

BCCS shall not deny a client services because of HIV infection of a family member. Any modifications in services and care provided to such clients shall be based strictly on medical necessity consistent with best available medical information about this infection.

#### 2. Foster Families

A family applying for certification as a foster home that has an HIV-infected household member shall not be denied certification for this reason alone. A certified foster family shall not be decertified because of HIV infection of a household member so long as the family clearly demonstrates knowledge of and the ability to follow all safeguards which are medically indicated in order for the family to provide adequate care for a child. The foster family shall be required to provide a statement from a physician verifying they have been informed of the appropriate care and precautions to take while caring for a patient infected with HIV.

#### 3. Institutions or Group Living Facilities with an HIV Infected Client

If Butler County Children Services becomes aware that an institution wherein BCCS has placed a child has a case of HIV infection among its clients or staff, BCCS shall immediately ascertain whether the institution has policies and procedures established and being followed to ensure a safe environment for the agency's client based on best available medical advice. If the institution can ensure a safe environment, no change of placement will be made based on the presence of HIV infection in the institutional or group setting.

#### 4. Requirements Relating to HIV Testing

In accordance with OAC 3701.242 informed consent must be obtained from the individual or legal guardian prior to administering an HIV test. Informed consent cannot be given until the following has occurred:

- The test procedure has been explained to the individual, including the purposes and limitations of the test and the meaning of its results.
- An explanation that the test is voluntary and that consent may be withdrawn at any time before the individual tested leaves the premises where the sample is taken for the test.
- An explanation is given about the behaviors known to pose risks for transmission of HIV infection.

A minor may consent to the test and that consent may not be opposed or contested by the parent or legal guardian. A minor may not refuse a test when a parent or legal guardian gives consent. Any individual seeking an HIV test shall have the right, upon his/her request, to an anonymous test.

Under Ohio law, as the legal guardian of the child, an agency with temporary custody, PPLA, or permanent custody may have the child tested for HIV.

It is recommended that Children Services inform the parent or prior guardian of the agency's intent to order an HIV test for a child in temporary custody. However, the agency may proceed with the test without the permission of the parent or prior guardian when the BCCS Executive Director determines that the test is in the best interest of the child. A substitute care provider may not give consent for a child to be tested.

#### 5. Criteria for Testing

Testing will be considered on a case by case basis when:

- A child has had intimate sexual contact with a person believed to have AIDS, be infected with HIV, or is a person believed to engage in high-risk behavior.
- A child is known to have shared needles used to inject intravenous drugs or any other substances.
- An infant or child's mother is confirmed to have been HIV positive or had AIDS or HIV at the time of the child's birth.
- A child displays symptomology consistent with HIV infection or AIDS.
- Upon the request of the child or parent/adult guardian

#### 6. Counseling

In accordance with ORC 3701.242, when HIV testing is arranged for an individual by Children Services, counseling must be provided to the individual at the time that he/she is told the result of the test or informed of a diagnosis of AIDS or of an AIDS-related condition. The individual shall be given an oral or written explanation of the nature of AIDS and AIDS-related conditions and the relationship between the HIV test and those diseases and a list of resources for further counseling or support.

When the individual is a minor child in BCCS custody and of an age to understand the test and the results, the child's worker shall accompany the child to the initial counseling.

When necessary, the individual shall be referred for further counseling to help him/her cope with the emotional consequences of learning the test result.

Children Services should also arrange counseling for the parent and/or substitute care provider of a child with HIV disease. Supportive services, including specific information about the illness, infectious control precautions, and assistance in coping with the range of emotions regarding the potential terminal nature of the disease should also be made available.

## 7. Confidentiality

Ohio law (ORC 3701.243) establishes strict standards for disclosing either the identity of an individual diagnosed with HIV infection or AIDS, or the result of an HIV test for an individual. The law prohibits persons employed by agencies of state or local governments from disclosing a person's HIV status. This includes documentation such as: dictation, family case plans, report to court, service referrals, investigation forms, etc. Rather than identifying the client's condition as HIV or AIDS, a worker should refer to the illness as "a chronic medical illness, the nature of which is confidential by law." The identity of an individual who was tested for HIV antibodies or an individual diagnosed as having AIDS may be disclosed only to:

- The individual tested, or the individual's legal guardian, the individual's spouse or any sexual partner(s);
- A person to whom disclosure is authorized by a written release, executed by the individual tested or by the individual's legal guardian and specifying to whom disclosure of the test results or diagnosis is authorized and the time period during which the release is to be effective;
- The individual's physician;
- The department of health or a health commissioner to which reports are made under section 3701.24 of the Revised Code;
- A health care provider, emergency medical services worker, or peace officer who sustained a significant exposure to the body fluids of another individual, if that individual was tested pursuant to division (E)(6) of section 3701.242 of the Revised Code, except that the identity of the individual tested shall not be revealed;
- To law enforcement officials pursuant to a search warrant or court order.

## 8. Placement of HIV infected children in custody of Butler County Children Services

Substitute caregivers have a right to know the nature of the child's illness, the extent of disability as a result of the illness and the medical prognosis. The agency shall not place in a foster home any child known to suffer from HIV unless the foster parents have agreed and have received special training in providing appropriate special care. The agency will make every reasonable effort, including provision of extraordinary support services to caregivers, to ensure appropriate care to HIV infected children who are in the agency's custody. BCCS shall determine which persons, agencies or institutions may receive notification of the child's HIV status and shall specifically authorize such disclosure in writing. The written Disclosure Authorization must list all persons to be notified and the effective time period of the notification. The substitute caregiver cannot inform anyone else including a childcare provider,

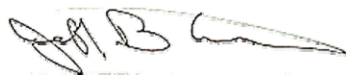
teacher, school official, or playmate's family. If a child is in the permanent custody of the agency, efforts to secure a permanent legal home for the child shall continue.

The following guidelines must be followed when placing a child with HIV/AIDS in substitute care:

- Placement of the child must be made with the best interest of the child as the key factor;
- Placement must be in the least restrictive setting capable of meeting the child's health and emotional needs;
- Children under age six with symptomatic HIV disease should not be placed with other children under the age of six;
- Any consultation conducted regarding the case plan or placement evaluations should be in a manner that does not breach the confidentiality of the child.

Effective Date: 5/17/10

Jeff Centers, Executive Director

A handwritten signature in black ink, appearing to read "Jeff B. Centers", written over a faint horizontal line.