

<p>U.S. DEPARTMENT OF EDUCATION</p> <p>PERSONNEL MANUAL INSTRUCTION</p>	<p>PMI <u>792-3</u></p> <p>DATE <u>NOV. 16 1994</u></p> <p>APPROVED:</p> <p><i>Veronica D. Trietch</i> Director of Personnel 07-09-02</p>
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Supersedes PMB 792-1, dated August 1, 1989

SUBJECT: Acquired Immune Deficiency Syndrome (AIDS) in the Workplace Policy Statement

I. AUTHORITY

This Instruction is based on and conforms with Federal laws and regulations prohibiting discrimination against Federal employees on the basis of disability established by Section 501 of the Rehabilitation Act of 1973, as amended, which incorporates the compliance standards regarding employment discrimination of Title I of the Americans with Disabilities Act of 1990 [29 U.S.C. § 791 (g)].

II. POLICY

The Human Immunodeficiency Virus (HIV) infection, which results in the Acquired Immune Deficiency Syndrome (AIDS), presents a number of economic, health, employment and legal issues for employees in the workplace. The Department is committed to maintaining a safe and health environment for all employees. The Department does not discriminate against employees on the basis of disability or association with another person having a disability, including HIV. It is the Department's policy that employees with HIV/AIDS may continue working as long as they are able to perform the essential functions of their position, with or without reasonable accommodation, and do not pose a safety or health threat to themselves or others that cannot be eliminated with a reasonable accommodation. It is also the Department's policy to provide accurate information about HIV/AIDS through an education program for employees.

III. APPLICABILITY

This Instruction is applicable to all Department of Education employees.

IV. DEFINITIONS

Human Immunodeficiency Virus (HIV). HIV Seropositivity, HIV positive, and HIV + are all terms signifying the presence of the HIV infection in an individual. The term is often used to describe the health status of an individual who is free of symptoms of the infection. The HIV virus attacks a person's immune system and damages his/her ability to fight other diseases. HIV attacks certain types of lymphocytes or T-cells throughout the body. It is the destruction or disabling of the T-cells that causes a loss of immune function, which results in AIDS.

Acquired Immune Deficiency Syndrome (AIDS) . AIDS is the clinical term associated with the later stages of HIV infection. When the immune system of a person with HIV begins to fail, that person is likely to develop infections, malignancies, or other health problems. The progression from HIV to AIDS is usually slow. Once infected, an individual may have the HIV virus a number of years before exhibiting symptoms associated with the HIV infection (e.g., one could be infected with HIV for ten years before the immune system is so weak as to result in an AIDS defining illness or condition).

In this Instruction, the term HIV/AIDS refers to the range of medical conditions which HIV-positive persons might have (i.e., from immunological impairment in early HIV infection to clinically diagnosed AIDS).

V. GUIDELINES

Individuals with HIV/AIDS may continue working as long as they are able to perform the essential functions of their position; however, reasonable accommodation may be required as the disease progresses.

To implement the Department's policy addressing the impact of HIV/AIDS in the workplace, the Department has developed the following guidelines for addressing employee issues that may arise:

A. Based on guidelines issued by the Centers for Disease Control, HIV/AIDS is an infectious disease that is transmitted by:

- (1) intimate sexual contact with an HIV-infected person;
- (2) intravenous use of contaminated needles; and (3) receipt of transfusions of contaminated blood. Medical evidence shows that HIV/AIDS is not transmitted through casual contact such as that which occurs in ordinary social or occupational settings and conditions. Therefore, HIV/AIDS is not spread through any of the following:

1. Working in the same office, shop, etc.

2. Donating blood.
3. Sneezing, coughing, or spitting.
4. Handshakes, hugging or non-sexual physical contact.
5. Sharing toilet seats.
6. Sharing various utensils, dishes, cups, or other objects used by HIV-positive persons.
7. Handling objects used by HIV-positive persons
(e.g., telephones).
8. Being in the presence of someone with HIV/AIDS on a daily basis over a long period of time.
9. Riding in the same vehicle as a person who is HIV-positive.
10. Eating in the same place with an HIV positive person.

Since casual contact in a workplace setting is safe, an employee with HIV/AIDS does not pose a direct threat to others. Thus, co-workers will not have a basis upon which to refuse to work, or to withhold their services, out of fear of contracting HIV by working with someone with HIV/AIDS. Employees may be subject to discipline if they refuse to work, or are found to have withheld their services, harassed, intimidated, or in any other manner discriminated against a person with HIV/AIDS, or against a person who has an association with an individual with HIV/AIDS.

- B. Recognizing the need for all employees to be accurately informed about HIV/AIDS, the Department is committed to educating its employees. Consistent and accurate information facilitates a better understanding of the nature of HIV/AIDS. Headquarters and each regional office should provide periodic education about HIV/AIDS for its entire staff. Training should incorporate both face-to-face training and written materials. The Department will make available to its employees both in headquarters and regional offices educational materials, such as medical information, films, pamphlets, and other health resource information pertaining to HIV/AIDS. There is also an abundance of new information available through a variety of other resources. (See Appendix A.)

Managers and supervisors may also use the educational resources and personnel of public health and community-based organizations that provide services to individuals with HIV/AIDS. Additional training can be provided by local Red Cross chapters, state or local public health departments, and/or a local HIV/AIDS service organization. Appendix A discusses how to contact each of these organizations.

- C. The Department will treat employees with HIV/AIDS the same as employees with any other serious illness and will ensure that employees with HIV/AIDS are not discriminated against on the basis of disability in the workplace. Upon request, employees with HIV/AIDS will be appropriately informed of their rights to such benefits as group life and health insurance, types of leave available, and any other disability benefits to which they are entitled. Employees with HIV/AIDS are entitled to continue working as long as they can perform the essential functions of their position, with or without reasonable accommodation. With respect to job restructuring, details, assignments, or other changes in position for employees diagnosed as having HIV/AIDS, any considerations made will be done in the same manner as they would for any other employees whose medical conditions or disabilities impact job performance. Established personnel policies and procedures will be observed in such cases in accordance with applicable laws and regulations.

The Department's policies and guidelines on the Selective Placement Program, including the policy on reasonable accommodation, are set forth in PMI 306-1.

Medical documentation may be required to make competent decisions about a request from an employee with HIV/AIDS for reasonable accommodation. Under 5 CFR Part 339, Medical Qualification Determinations, it is the employee's responsibility to produce medical documentation regarding the extent to which a medical condition or disability is affecting job performance or conduct. Any medical documentation submitted for the purpose of making an employment-related decision will become a part of the file pertaining to that decision, and will thus become a "record" covered by the Privacy Act. Generally, the Privacy Act forbids the disclosure of records which it covers, except that access to medical documentation may be granted to agency officials with the need to know such information in order to make appropriate managerial decisions. Management officials responsible for developing and implementing managerial decisions involving employees with HIV/AIDS should strictly observe applicable privacy and confidentiality requirements.

- D. Management officials and Department employees in need of information related to HIV/AIDS in the workplace should contact the Employee Relations Branch of the Human Resources Group or the appropriate Regional Personnel Office.
- E. In addition, employees with concerns about HIV/AIDS are encouraged to contact the Department's Employee assistance Program (EAP). (See Appendix B, page 7). Arrangements can be made to meet with an EAP counselor in a confidential setting at the Department or another location, at the discretion of the employee. All discussions with the EAP are confidential and at no cost to the employee. The EAP is an important resource for understanding HIV/AIDS, and its impact in the workplace. Employees with HIV/AIDS, or those seeking more information about HIV/AIDS, may contact the EAP to discuss their concerns. In addition, the EAP will be able to assist with referrals to professionally trained counselors and other community and medical resources.
- F. With respect to leave administration, any employee with HIV/AIDS may request sick or annual leave, or leave without pay, to pursue medical care or to recuperate from the effects of his/her medical condition. The Family and Medical Leave Act of 1993 entitles employees to twelve weeks of unpaid leave in a twelve month period for personal and family medical emergencies. Information on the applicable requirements for various types of leave, including advanced leave and leave under the Family and Medical Leave Act, is available from the Employee Relations Branch or the Regional Personnel Offices. Medical documentation will be reviewed and any determination to grant or deny leave would be made in the same manner as for employees with other medical conditions or disabilities.
- G. With respect to insurance and disability retirement benefits, employees with HIV/AIDS can continue programs in which they are enrolled, such as insurance coverage under the Federal Employees' Health Benefits (FEHB) and/or the Federal Employees' Group Life Insurance (FEGLI) Programs. Continued participation in either or both of these programs cannot be jeopardized because of one's health condition. Under FEGLI, death benefits are payable and are not subject to cancellation due to health status. Any employee who is in a leave without pay status for 12 continuous months will face statutory loss of FEHB and FEGLI coverage, but he/she does have the right to convert to a nonfederal private policy without demonstrating proof of insurability. Employees with HIV/AIDS may be eligible for disability retirement if their health status warrants and if they have

the requisite years of Federal service to qualify. Further information is available in headquarters, from the Employee Relations Branch, and in the regional offices, from the Regional Personnel Offices. Employees are urged to consult with these offices since the rules governing benefits may vary depending on the particular program(s) in which an employee is enrolled.

- H. Appendix A contains the names, addresses and telephone numbers of some national, state and community organizations that employees may contact as additional resources. Appendix B contains some questions and answers about HIV/AIDS that may be of interest to employees in the Department.

A. Federal Government Sources

Office of the National AIDS Policy Coordinator

750 17th Street, N.W.
Room 600
Washington, D.C. 20503
(202) 632-1090

Office to coordinate all AIDS education, policy development, and training throughout the Federal government.

Office of Personnel Management

Personnel Systems and Oversight Group
Office of Employee and Labor Relations
1900 E Street, NW, Room 7412
Washington, DC 20415
(202) 606-1269

Establishes personnel management policies for the Federal sector. Administers the Federal employee pay, retirement, and benefits programs. Provides technical assistance and support to agencies in administering their personnel programs.

U.S. Public Health Service

Hubert H. Humphrey Building
200 Independence Avenue, S.W.
Washington, D.C. 20201

Lead agency in the distribution of information about HIV/AIDS, both general and technical in nature.

Public Health Service Regional Offices

Region I

Connecticut, Maine
Massachusetts, New Hampshire,
Rhode Island, Vermont

John F. Kennedy Federal Bldg.
Room 1826
Boston, MA 02203
(617) 565-1426

Region II

New Jersey, New York,
Puerto Rico, Virgin Islands

26 Federal Plaza, Room 3337
New York, NY 10278
(212) 264-2560

Region III

Delaware, District of
Columbia, Maryland,
Pennsylvania, Virginia
West Virginia

Gateway Building
3535 Market Street
Philadelphia, PA 19104
Mailing Address:
P.O.B. 13716
(215) 596-6637

Region IV

Alabama, Florida, Georgia,
Kentucky, Mississippi, North
Carolina, South Carolina,
Tennessee

101 Marietta Tower Suite
Suite 1106
Atlanta, GA 30323
(404) 331-2316

Region V

Illinois, Indiana, Michigan
Minnesota, Ohio, Wisconsin

105 West Adams
17th Floor
Chicago, IL 60603
(312) 353-1385

Region VI

Arkansas, Louisiana,
New Mexico,
Oklahoma, Texas

1200 Main Tower Building
Room 1800
Dallas, TX 75202
(214) 767-3879

Region VII

Iowa, Kansas, Missouri,
Nebraska

Federal Office Building
601 East 12th Street, 5th Flr.
Room 501
Kansas City, MO 64106
(816) 426-3291

Region VIII

Colorado, Montana
North Dakota, South Dakota

Federal Office Building
1961 Stout Street, 4th Floor
Denver, CO 80294-3538
(303) 844-6163

Region IX

American Samoa, Arizona,
California, Guam, Hawaii,
Nevada, Trust Terr. Of the
Pacific Islands, Comm. of
Northern Mariana Islands

Federal Office Building
50 United Nations Plaza
Room 319
San Francisco, CA 94102
(415) 556-5810

Region X

Alaska, Idaho, Oregon,
Washington

Blanchard Plaza Building
Room 170A
2201 Sixth Avenue
Seattle, WA 98121
(206) 615-2469

AIDSLINE

US Department of Health and Human Services
Public Health Service/National Institutes of Health/National
Library of Medicine
8600 Rockville Pike
Bethesda, MD 20894
(800) 638-8480

AIDSLINE is an online, bibliographic file of published literature focusing on research, clinical aspects, and health policy issues.

B. State Health Department Points of Contact

Alaska

Alaska Department of Health and Social Services
Division of Public Health
Section of Epidemiology
AIDS/STD Program
3601 C St., Ste. 576
Anchorage, AK 99503-0249
(907) 561-4406
(800) 478-AIDS (in AK only)

Alabama

Alabama Department of Public Health
Division of Disease Control
Sexually Transmitted Disease Branch
434 Monroe Street
Montgomery, AL 36130-1701
(205) 242-5838

Arkansas

Arkansas Department of Health
Sexually transmitted Disease Division
AIDS Prevention Program
4815 W. Markham, Slot 33
Little Rock, AR 72205-3867
(501) 661-2408

American Samoa

American Samoa Department of Health Services
LBJ Tropical Medical Center
Pago Pago, AS 96799
(011) 633-4071

Arizona

Arizona Department of Health Services
Division of Disease Prevention
Office of HIV/AIDS Services
3815 N. Black Canyon Hwy.
Phoenix, AZ 85015
(602) 230-5819
(800) 334-1540 (in AZ only)

California

California Department of Health Services
Office of AIDS
830 S Street
Sacramento, CA 94234
(916) 323-7415

Colorado

Colorado Department of Health
Disease Control and Environmental Epidemiology
STD/AIDS Division
4300 Cherry Creek Drive, South
Denver, CO 80220-1530
(303) 692-2000
(303) 782-5186 (hotline for Denver callers only)
(800) 252-2437 (hotline for CO only)

Connecticut

Connecticut Department of Health Services
AIDS Program
150 Washington Street
Hartford, CT 06106
(203) 566-1157

District of Columbia

District of Columbia Commission of Public Health
Office of AIDS Administration
1660 L Street, NW, 7th Flr.
Washington, DC 20036
(202) 727-2500

Delaware

Delaware Department of Health and Social Services
Division of Public Health
Health Monitoring and Program Consultation
Building G
3000 Newport Gap Pike
Dover, DE 19903
(302) 739-3033

Florida

Florida Department of Health and Rehabilitative Services
AIDS Program
1317 Winewood Blvd.
Tallahassee, FL 32399-0700
(904) 922-6675

Federated States of Micronesia

National Government of the Federated States of Micronesia
Department of Human Resources
AIDS Drug Reimbursement Program
P.O. Box PS-70
Kolonia Pohnpei, FM 96941
(011) 320-2619

Georgia

Georgia Department of Human Resources
Division of Public Health
Communicable Disease Branch
AIDS Section
2 Peachtree Street, NW
10th Flr., Ste. 400
Atlanta, GA 30303-3186
(404) 657-3100
(800) 551-2728 (TTY and voice, in GA only)

Guam

Guam Department of Public Health and Social Services
Communicable Disease Control
AIDS Program
P.O. Box 2816
Mangilao, GU 96910
(011) 734-AIDS

Hawaii

Hawaii Department of Health
Communicable Disease Division
STD Prevention Branch
Diamonhead Health Center
STD/HIV Clinic
3627 Kilauea Avenue, Ste. 305
Honolulu, HI 96816
(808) 733-9010

Iowa

Iowa Department of Health
Division of Health Protection
AIDS Prevention Program
Lucas State Office Building
321 E. 12th Street
Des Moines, IA 50319-0075

Idaho

Idaho Department of Health and Welfare
Division of Health
Bureau of Communicable Disease
450 W. State Street
Boise, ID 83720
(208) 334-5937

Illinois

Illinois Department of Public Health
Division of Infectious diseases
AIDS Activity Section
160 N. Lasalle Street, 7-South
Chicago, IL 60567
(312) 841-4846

Indiana

Indiana Department of Health
Division of Acquired Diseases
Bureau of Disease Intervention
AIDS Program
1350 W. Michigan Street
Indianapolis, IN 46206
(317) 633-0851
(800) 848-AIDS (in IN only)

Kansas

Kansas Department of Health and Environment
Bureau of Disease Control
AIDS Section
Mills Building, Ste. 605
109 SW 9th Street
Topeka, KS 66612-1271
(913) 296-6173

Kentucky

Kentucky Department of Health Services
Communicable Disease Branch
Epidemiology Division
AIDS Surveillance Program
275 E. Main Street
2nd Flr., E.
Frankfort, KY 40621
(502) 564-3418

Louisiana

Louisiana Department of Health and Hospitals
Office of Public Health
Louisiana AIDS Prevention and Surveillance Program
325 Loyola Avenue, Rm. 615
New Orleans, LA 70112
(504) 568-7525

Massachusetts

Massachusetts Department of Public Health
150 Tremont Street
Boston, MA 02111
(617) 727-0368

Maryland

Maryland Department of Health and Mental Hygiene
AIDS Administration
Center for AIDS Education
201 W. Preston Street, 3rd Flr.
Baltimore, MD 21201
(410) 225-5013
(800) 638-6252 (in MD only)

Maine

Maine Department of Human Services
Disease Control Division
Office on AIDS
157 Capitol Street
Augusta, ME 04330
(207) 287-3747
(800) 351-2437

Marshall Islands

Marshall Islands Department of Health Services
P.O. Box 16
Majuro, MH 96960
(011) 625-3355

Michigan

Michigan Department of Public Health
Bureau of Infectious Disease Control
HIV/AIDS Prevention and Intervention Section
3500 N. Logan/MLK Jr. Blvd.
Lansing, MI 48909
(517) 335-8371

Minnesota

Minnesota Department of Health
Division of Disease Prevention and control
AIDS/STD Prevention Services Section
717 SE Delaware Street
Minneapolis, MN 55440
(612) 623-5698

Missouri

Missouri Department of Health
Bureau of AIDS Prevention
1730 E. Elm
Jefferson City, MO 65101
(314) 751-6438
(800) 533-AIDS

Northern Mariana Islands

Department of Public Health and Environmental Services
AIDS Drug Reimbursement Program
Commonwealth Health Center
Saipan, MP 96950
(011) 234-8950

Mississippi

Mississippi Department of Public Health
AIDS/HIV Prevention Program
2423 N. State Street
Jackson, MS 39215-1700
(601) 960-7723

Montana

Montana Department of Health and Environmental Sciences
Preventive Health Services Bureau
AIDS/STD Program
Cogswell Building
1400 Broadway; Room C-317
Helena, MT 59620
(406) 444-3565
(800) 233-6668 (hotline)

Nebraska

Nebraska Department of Health
Division of Disease Control
HIV/AIDS Program
301 Centennial Mall S.
Lincoln, NE 68509
(402) 471-2937
(800) 782-AIDS

Nevada

Nevada Department of Human resources
Health Program Section
Division of STDs/HIV
505 E. King Street, Rm 300
Carson City, NV 89710
(702) 687-4804

New Hampshire

New Hampshire Department of Health and Human Services
Division of Public Health Services
HIV/AIDS Program
Health and Welfare Building
6 Hazen Drive
Concord, NH 03301
(603) 271-4576
(800) 752-AIDS

New Jersey

New Jersey Department of Health
Division of AIDS Prevention and Control
CN 363
363 W. State Street
Trenton, NJ 08625-0363
(609) 292-2121
(800) 624-2377

New Mexico

New Mexico Health Department
Public Health Division
HIV/AIDS/STD Prevention and Services Bureau
1190 St. Francis Drive
Santa Fe, NM 87502
(505) 827-0090
(800) 545-AIDS (NM only)

New York

New York Department of Health
Office of Public Health
AIDS Institute
Corning Tower, Rm 342
Albany, NY 12237-0684
(518) 473-7238

North Carolina

Department of Environment, Health, and Natural Resources
Communicable Disease Control Section
HIV/STD Control Branch
225 N. McDowell Street
Raleigh, NC 27611-7687
(919) 733-7301

North Dakota

Department of Health and Consolidated Laboratories
Division of Disease Control
AIDS Program
600 E. Boulevard
Bismarck, ND 58505-0200
(701) 224-2378
(800) 472-2180 (ND only)

Ohio

Ohio Department of Health
Division of Preventive Medicine
AIDS Unit
35 E. Chestnut Street, 7th Flr
Columbus, OH 43266-0588
(614) 466-5480

Oklahoma

Oklahoma Department of Health
AIDS Division
1000 NE 10th Street
Oklahoma City, OK 73117-1299
(405) 271-4636
(800) 535-2437 (in OK only)

Oregon

Oregon Department of Human Resources
Health Division
800 NE Oregon Street, Ste 745
Portland, OR 97232-2109
(503) 731-4029
(800) 777-AIDS (in OR only)

Palau

Republic of Palau Ministry of Health
Bureau of Public Health
P.O. Box 6027
Koror, PW 96940
(680) 488-2813

Pennsylvania

Pennsylvania Department of Health
Bureau of HIV/AIDS
Forester & Commonwealth Avenues
H&W Building, Rm 913
Harrisburg, PA 17120
(717) 783-0479
(800) 662-6080 (in PA only)

Puerto Rico

Puerto Rico Departamento de Salud
Oficina Central para Asuntos del SIDA
Edificio Gonzalez Padin
Cale Fortaleza, Esuina Cruz
6to Piso
San Juan, PR 00901
(801) 721-2000

Rhode Island

Rhode Island Department of Health
Division of Disease Control
Office of AIDS/STD
3 Capitol Hill, Rm 105
Providence, RI 02908-5097
(401) 277-2320

South Carolina

South Carolina Department of Health & Environmental Control
Bureau of Preventive Health Services
HIV/AIDS Division
AIDS Prevention Program
2600 Bull Street
Columbia, SC 29201
(803) 737-4061

South Dakota

South Dakota Department of Health
Office of Communicable Disease Control and Prevention
AIDS Prevention Project
445 E. Capitol
Pierre, SD 57501-3185
(605) 773-3364

Tennessee

Tennessee Department of Health
AIDS Program
C2- 221 Cordell Hull Building
Nashville, TN 37247-4947
(615) 741-7500
(800) 525-2437 (in TN only)

Texas

Texas Department of Health
Bureau of HIV and STD Prevention
HIV Division
1100 W. 49th Street
Austin, TX 78756-3199
(512) 458-7209
(800) 299-2437 (in TX only)

Utah

Utah Department of Health
Division of Community Health Services
Bureau of HIV/AIDS Prevention and Control
288 N. 1460 W.
Salt Lake City, UT 84116-0660
(801) 538-6096

Virginia

Virginia Department of Health
Division of Communicable Disease Control
STD/AIDS Control Program
109 Govenor Street, Rm 112
Richmond, VA 23219
(804) 786-6267
(800) 533-4148

Virgin Islands

Virgin Islands Department of Health
Community Health Services
AIDS Prevention Program
516 Strand Street
Fredericksted
St. Croix, VI 00840
(809) 774-3168

Vermont

Vermont Department of Health
Division of Epidemiology
AIDS Program
108 Cherry Street
Burlington, VT 05401
(802) 863-7200

Washington

Washington Department of Health
Division of HIV/AIDS and STDs
Airdustrial Pk., Building 9
Mail Stop LJ-17
Olympia, WA 98504
(206) 586-0426
(800) 272-AIDS (in WA only)

West Virginia

West Virginia Department of Health and Human Resources
Office of Epidemiology and Health Promotion
Division of Surveillance and Disease Control
AIDS Program
1422 Washington Street, East
Charleston, WV 25301
(304) 558-2950

Wisconsin

Wisconsin Department of Health and Social Services
Division of Health
AIDS/HIV Program
1414 E. Washington Avenue
Room 241
Madison, WI 53703-3044
(608) 267-5287

Wyoming

Wyoming Department of Health and Social Services
Division of Health and Medical Services
Preventive Medicine Services
AIDS Prevention Program
Hathaway Building
2300 Capitol Avenue
Cheyenne, WY 82002-0710
(307) 777-5800
(800) 327-3577 WY only)

C. Other Resources (Organizations)**AIDS Clinical Trials Information Service**

P.O. Box 6421
Rockville, MD 20849-6421
(800) 874-2572

Public Health Service project; provides current information on federally- and privately-sponsored clinical trials for HIV-infected individuals.

American Foundation for AIDS Research (AmFAR)

5900 Wilshire Blvd., 23rd Floor
Los Angeles, CA 90036-5032
(800) 392-6327

A national, nonprofit public foundation which supports research and provides education in AIDS prevention.

American Red Cross (National Headquarters)

Office of HIV/AIDS Education
1750 K Street, NW, 7th Floor
Washington, DC 20006
(202) 973-6000

Provides HIV/AIDS related services and products through local Red Cross Coordinators. Contact your local Red Cross (numbers in local telephone directories) for more information.

CDC National AIDS Hotline

P.O. Box 13827
Research Triangle Park, NC 27709
(800) 342-2437 (Hotline)

Toll-free service available to the public 24 hours a day, 7 days a week, throughout the US and its territories. Provides confidential information and referrals related to AIDS and HIV infection.

Centers for Disease Control (CDC) AIDS Clearinghouse

P.O. Box 6003
Rockville, MD 20849-6003
(800) 458-5231

National reference, referral, and publications distribution service for HIV and AIDS information.

Health Education Resource Organization (HERO)

101 West Read Street, Suite 825
Baltimore, MD 21201
(410) 545-4774 (DC Metro Area)
(800) 376-Hero (Rest of Maryland)

Private, nonprofit AIDS organization which provides direct client care, prevention education, case management, and legal, mental, health, and referral services.

NAMES Project Foundation

AIDS Memorial Quilt
310 Townsend, Suite 310
San Francisco, CA 94107
(415) 882-5500

Information regarding the AIDS Memorial Quilt.

National Association of People With AIDS (NAPWA)

1413 K Street, NW, 7th Floor
Washington, DC 20005
(202) 898-0414

National information resource.

National Native American AIDS Prevention Center

Indian AIDS Hotline
3515 Grand Avenue, Suite 100
Oakland, CA 94610
(800) 283-2437 (Hotline)

Toll-free number for questions specific to Native Americans related to AIDS.

National Minority AIDS Council (NMAC)

300 Eye Street, N.E.
Suite 400
Washington, D.C. 20002-4389

NMAC coordinates the response to AIDS-related issues for people of color.

National Organizations Responding to AIDS (NORA)

1875 Connecticut Avenue, NW, Suite 700
Washington, DC 20009
(202) 986-1300

Includes over 150 national AIDS-related organizations.

Whitman-Walker Clinic

AIDS Program
1407 S Street, NW
Washington, DC 20009
(202) 833-3234 (Hotline)

Non-profit, volunteer-based lesbian and gay community health organization serving the Washington, DC metropolitan area. Provides a variety of AIDS-related services.

D. Electronic Bulletin Boards

The following is a sample of phone numbers which are data-lines that can be dialed with a modem. This information and more may be found in the Guide to AIDS-Related Electronic Bulletin Boards and Internet Resources, published by the CDC National AIDS Clearinghouse. For more information, call (800) 458-5231.

AIDS Info BBS – (415) 626-1246
San Francisco, CA

Ban-AIDS BBS – (205) 264-8090
Montgomery, AL

Black Bag BBS – (302) 994-3772
Wilmington, DE

Boston AIDS Consortium SPIN – (617) 432-2511
Boston, MA

Critical Path AIDS Project BBS – (215) 563-7160
Philadelphia, PA

FedWorld – (703) 321-8020
Washington, DC

HIV/AIDS Information BBS – (714) 248-2836
San Juan Capistrano, CA
(Note: Central hub of the AIDS Education and General Information System (AEGIS))

Legalnet – (813) 343-0543
St. Petersburg, FL

OASH BBS – (202) 690-5423
Washington, DC

Positively Healthy – (503) 243-2557
Portland OR

Seattle AIDS Information BBS – (206) 323-4420
Seattle, WA

AIDS IN THE WORKPLACE

The issue of Acquired Immune Deficiency Syndrome (AIDS) in the workplace has recently gained considerable attention. Employee concerns about AIDS and Human Immunodeficiency Virus (HIV) in the workplace have escalated in light of an increase in the number of cases. Consequently, employees should know more about HIV and AIDS and how these illnesses directly and indirectly affect the workplace.

This handout is designed to help you understand and effectively handle HIV and AIDS-related issues in the workplace. The material is in conformance with the Office of Personnel Management (OPM) guidelines, and has been adapted for distribution to Department of Education employees from a pamphlet prepared by the U.S. Department of Health and Human Services. It will inform you of your rights and responsibilities as an employee, supervisor, or manager regarding the effects of AIDS and HIV infection. It is not intended to replace the actual Departmental policies or applicable laws or regulations related to HIV or AIDS in the workplace. Although general information about benefits is included here, the best source for accurate information about leave, life insurance, health insurance, and retirement benefits as applied to your individual situation would be the Employee Relations Branch of the Human Resources Group in headquarters, or your Regional Personnel Offices.

Why is it important to have an AIDS-awareness program?

An AIDS-awareness program is important because, despite millions spent on education, many people are still ignorant about AIDS. Everyone needs to know how the disease is contracted and what constitutes risky behavior. In addition, many people with AIDS have been subjected to unfair treatment as the result of ignorance. It is particularly important that the Department of Education set a good example by making certain that none of us is either the victim or the perpetrator of discrimination.

What is AIDS?

AIDS is caused by the Human Immunodeficiency Virus. HIV attacks certain types of lymphocytes or T-cells throughout the body. It is the destruction or disabling of the T-cells that causes a loss of immune function, which results in AIDS.

Approximately one million Americans are infected with HIV. The progression from HIV infection to AIDS is usually slow. One could be infected with HIV for ten years before the immune system is so weak as to result in an AIDS defining illness. Therefore, a person with HIV may be a productive member of the workforce for many years.

When an infected person's immune system begins to fail, that person is likely to develop infections, malignancies, or other health problems which lead to the diagnosis of AIDS.

Some of the conditions associated with destructive effects of HIV include Pneumocystis carinii pneumonia (PCP), Kaposi's sarcoma (KS), meningitis and hepatitis.

How does one become infected with HIV?

Transmission of HIV can only occur through direct bloodstream to bloodstream contact between two people one of whom has the HIV infection (e.g., blood transfusions, sharing IV needles, sexual intercourse, and from an HIV+ mother to fetus or infant). HIV is not transmitted through casual contact such as handshaking or hugging. HIV does not survive outside the body long enough to allow for transmission through the air from a cough or a sneeze or by contact with a contaminated surface such as a water glass or eating utensils. An infected worker may have many productive and satisfying years of employment before HIV causes any significant disability. In fact, OPM guidelines issued by the Public Health Service's Centers for Disease Control (CDC), state that "the kind of nonsexual person-to person contact that generally occurs among workers and clients or consumers in the workplace does not pose a risk for transmission of [AIDS]."

What do I do if I am HIV+ or have AIDS?

You may have many productive and satisfying years of employment before HIV/AIDS causes significant disability. However, if your condition starts to affect your job performance and you request some type of accommodation, you must provide medical documentation to support your request. For a definition of medical documentation, contact the Employee Assistance Program (EAP), the Employee Relations Branch in headquarters, or your Regional Personnel Office.

Employees who are HIV+ or have AIDS must follow the same procedure for requesting accommodation as for any other illness or disability. If you do not provide sufficient documentation to allow the Department to make an informed decision about reasonable accommodation, the Department may offer you the opportunity to undergo a medical examination.

But I don't want anyone to Know!

There are advantages and disadvantages to revealing your health problems to supervisors and co-workers. Frankness allows for open discussion, it can reduce tension, and it can create a supportive, understanding atmosphere by eliminating unwarranted fears (such as the notion that HIV/AIDS can be transmitted casually in the workplace). Whether you choose to disclose your status or not, however, your supervisor should respect your decision.

What will happen if I disclose I am HIV+ or have AIDS?

You should be treated in the same manner as any other employee who suffers from a serious illness or disability. When you provide acceptable evidence showing that a medical condition or a disability causing a performance deficiency exists, the Department must determine whether accommodation can be made. Reasonable accommodation

could result in adjustments in the work environment and the work itself so that you are able to perform the essential functions of your job at an expected level (which would be determined by you, your supervisor, and your physician, in accordance with the Department's policy on reasonable accommodation). If no reasonable accommodation can be made, the Department will discuss other solutions with you.

How do I request sick leave?

You may request use of sick or annual leave, or leave-without-pay (LWOP), to pursue medical care or to recover from any ill effects of your condition. Under certain conditions, you may request advanced sick or annual leave if it appears that your employment will continue and that you will be able to repay the advanced leave. You may apply to become a recipient under the Voluntary Leave Transfer Program, in which fellow employees may donate leave to you. In addition, the new Family and Medical Leave Act of 1993 entitles every employee up to 12 weeks of unpaid leave in a twelve month period, for personal and family medical emergencies. The Act also protects your rights to our job, or an equivalent job, while taking unpaid leave under the Act.

What about my life insurance and health benefits plan?

Assuming you are enrolled in the programs, you can continue your coverage under the Federal Employees Health Benefits (FEHB) Program and/or the Federal Employees' Group Life Insurance (FEGLI) Program in the same manner as other employees. Your continued participation in either or both of these programs would not be jeopardized solely because of your medical condition.

The health benefits plans cannot exclude coverage for medically necessary health care services based on an individual's health status or on a pre-existing condition. Similarly, the death benefits payable under the FEGLI Program cannot be canceled solely because of your current health condition. However, any employee who is in LWOP status for 12 continuous months faces the statutory loss of FEHB and FEGLI coverages, but has the privilege of conversion to private policies without a physical examination.

Is disability retirement an option?

You may retire on disability if you meet eligibility requirements and your medical condition warrants. OPM will consider your application for disability retirement in the same manner as for other employees, focusing on the extent of your incapacitation and ability to perform your assigned duties. OPM makes every effort to expedite any application where the employee's illness is in an advanced stage and is life threatening.

As a supervisor, how can I respond most effectively?

The physical implications of AIDS are very serious. However, what may be most difficult and upsetting for an HIV+ employee is suffering misunderstanding and rejection from family, friends, fellow workers, and his or her community. Along with these

emotions will be the grief and sadness the employee is feeling regarding the inevitability of a shortened life-span.

Given people's misunderstandings about AIDS, you may have to handle different types of issues compared to those that arise with other terminal illnesses. If you are not already informed about issues such as grief and despair, contact you EAP for consultation about these and other emotions that may arise.

You can also help the HIV+ or AIDS infected employee by educating his or her fellow co-workers about the illness, as appropriate. The importance of educating fellow workers about AIDS cannot be overemphasized. In addition, it is important to encourage co-workers to have compassion for any fellow worker in this spiraling, stressful situation.

What should I do if one of my employees discloses to me that he or she is HIV+ or has AIDS?

No special procedures need or should be followed on supervising HIV+ employees because the disease at this stage is not likely to have an adverse impact on an employee's job performance. Confidentiality of this information must be strictly protected. The laws which govern prohibited discrimination, as well as the Department's anti-discrimination policies apply.

You may want to explain to the HIV+ or AIDS infected employee the advantages and disadvantages of being candid about their condition. Frankness allows for open discussion, reduces tension, and can create a supportive, understanding atmosphere by eliminating unwarranted fears that AIDS can be transmitted casually in the workplace. Whether your employee chooses to disclose to others or not, you must respect his or her decision.

What do I do when my HIV+ employee's job performance begins to decline?

When HIV infection results in a decline in the employee's health and ability to perform safely and effectively, you should treat the HIV-infected employee in the same manner as employees who suffer from other serious illnesses or disabilities, by looking into reasonable accommodation options.

If reasonable accommodation does not improve job performance, you should meet with your employee to discuss the specific work shortfall(s), work with him or her to determine corrective measures, set goals and deadlines, and give regular feedback. You may also want to consider consulting with the EAP, the Employee Relations Branch at headquarters, or your Regional Personnel Office, about how to proceed with this complex situation.

What about confidentiality?

It is the Department's policy based on Federal law and regulation to protect the confidentiality of information related to AIDS and any other medical condition.

None of my employees are HIV+ or have AIDS that I am aware of... do I still need to do anything?

Offering AIDS information and education programs is strongly recommended. It is best to initiate educational awareness activities before an AIDS-related problem arises. Employees who have experienced AIDS education in the workplace rate it as extremely valuable, especially when the program is comprehensive, is given on official time, and is required so that employees are not uncomfortable about attending.

I just found out one of my co-workers is HIV+ (or has AIDS), and I am very concerned about how this will affect me and other workers...

You should feel reassured that you work in an environment that supports open, two-way communication. If you are unclear about the Department's workplace policies, you should request this information from your supervisor. Your concerns should be taken seriously by your supervisor, and addressed with appropriate information and counseling.

The Department is committed to addressing both the psychological needs of an employee who is HIV+ or develops AIDS and the related concerns raised by their co-workers. Understanding the Department's policies will ensure that you do not act in a discriminatory manner toward an AIDS-infected co-worker or one who is a care-giver to someone with AIDS.

Although your workloads may increase to compensate for an HIV+ or AIDS-infected employee's reduced work capacity, all illnesses that employees may acquire, including heart disease and cancer, are covered by the Department's reasonable accommodation policy.

I'm still apprehensive about working with someone who is HIV+ or has AIDS...

There is no medical reason for you or any other employee to feel apprehensive about working with HIV-infected employees or clients. Your feelings of apprehension can best be allayed by talking them through with your supervisor and/or EAP counselor. Charitable discussions of your concerns with the appropriate person(s) will ensure that you don't act out your feelings in a way that could cause conflict for you and your co-workers.

Are federal employees with AIDS protected by any kind of Federal law?

Section 501 of the Rehabilitation Act of 1973, which incorporates the compliance standards of Title I of the American with Disabilities Act, prohibits both discrimination against Federal employee's on the basis of disability, or on the basis of a Federal employee's association with a person with a disability.

Will the Department require any employees or applicants for employment to undergo blood testing for HIV?

The Department will not require any employees or applicants for employment to undergo blood testing for HIV. However, the Department may require an individual seeking a reasonable accommodation for employability because of any medical condition or disability, including being HIV+ or having AIDS, to provide medical documentation to support that request for an accommodation. Any medical documentation that is submitted will be covered by the Privacy Act, which generally prohibits the disclosure of medical documentation and requires that it be treated confidentially.

Where can I go and what can I do if I feel that I have been treated unfairly because I am HIV+ or have AIDS, or because of my association with a person who is HIV+ or has AIDS?

You should contact the Department's Equal Employment Opportunity Staff (EEO) of the Office of Management. An EEO counselor in that office will explain your rights and responsibilities -- including how to file a complaint under Section 501 of the Rehabilitation Act of 1973, which protects all Federal employees from discrimination on the basis of disability or on the basis of a Federal employee's association with a person with a disability.

Where can I go for additional help and information?

The Department's EAP is an excellent source of information, guidance, and counseling for both employees and supervisors. EAP counselors can refer employees to community testing and counseling services, and treatment centers, as needed. The EAP counselor can also prepare supervisors and managers to deal with employee concerns regarding AIDS issues.

In addition, the EAP, the Employees Relations Branch in headquarters and/or your Regional Personnel Office can answer any questions you have about confidentiality, reasonable accommodation, leave, and insurance benefits.

Finally, the National AIDS Hotline (1-800-342-AIDS) is another good source of confidential information.

General Information Resource:

CDC National AIDS Clearinghouse
PO Box 6003
Rockville, Maryland 20849-5231
800-458-5231

Your local EAP office:

U.S. Department of Education
Employee Assistance Program

Headquarters

(301) 570-3900	
c/o Health Units	
FB-10B (A118)	- 401-0464
ROB-3 (4114)	- 708-6703
Switzer (3050)	- 205-5416
Capitol Place (GAO Building)	- 512-5486

Regional Offices

Contact Your Regional Personnel Office for the EAP office in Your Region