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18 November 1986

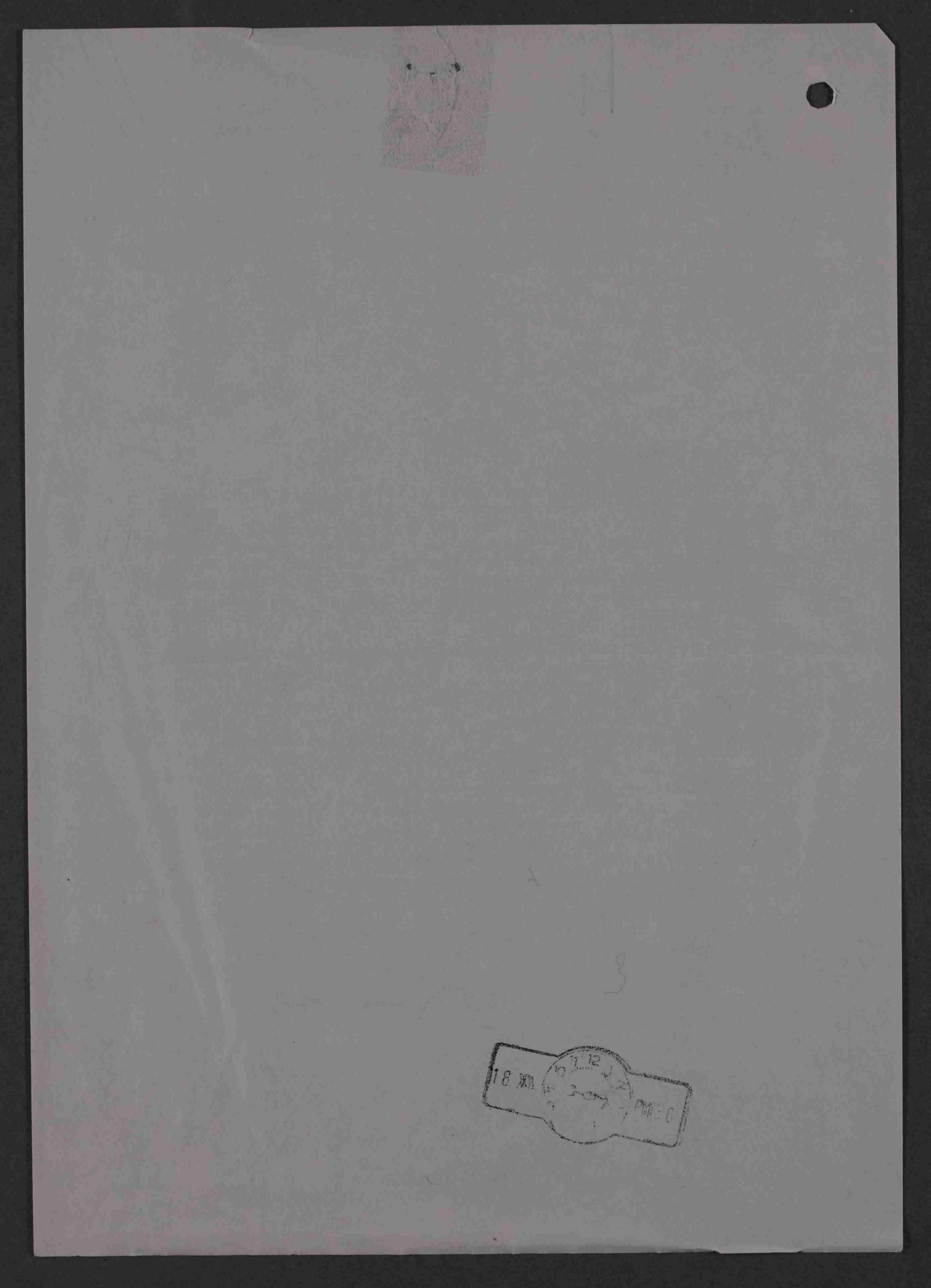
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### AIDS AND EMPLOYMENT

I am very sorry to discover that I will have to miss the second meeting of H(A) because the time clashes with my contribution to the Debate on the Address, particularly since EC Presidency duties prevented me from attending the first meeting last week. I believe there is now an urgent need for us to establish a clear overall policy direction and to make provision for a major continuing campaign of public information and education.

The paper (H(A)(86)2) which you considered on the current situation in the UK referred in Annex D to guidance for employers being prepared by the Department of Employment. I am happy to be able to tell you that this booklet is now printed and I enclose a copy for your information. I intend to publish it at a press conference on 24 November and to send copies directly to some 400,000 employers. This will offer some response to growing public interest in the employment implications of HIV infection, and may provide useful additional evidence of Government activity in advance of fresh initiatives in the public health field. My officials have worked closely with DHSS officials and the CMO throughout the preparation of the booklet and I shall naturally keep in touch with Norman Fowler to ensure that public presentation is co-ordinated.

I am copying this letter to the Prime Minister, to members of  $\mathrm{H}(\mathrm{A})$ , and to Sir Robert Armstrong.



A.I.D.S. and Employment
The Mailing House
Leeland Road
London
W139HL

# ALL DESACTIONS Acquired Immune Deficiency Syndrome AND EMPLOYMENT

Department of Employment DC and the Health and Safety Executive

Allow 14-21 days for delivery	Address	Company	Position	Name	Please send copies of the A.I.D.S
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## **Employment and Industrial Relations**

Advisory, Conciliation and Arbitration Service (ACAS). This is an independent statutory organisation with a national network of offices and staff. ACAS provides information and advice on employment practice and industrial relations. It also provides conciliation, mediation and arbitration as a means of avoiding and resolving industrial disputes. Addresses and telephone numbers are in local telephone directories.

The following booklets and further copies of this booklet may be obtained free of charge from any jobcentre or unemployment benefit office:

Unfairly dismissed — a guide for employees (PL 712) Fair and unfair dismissal — a guide for employers (PL 714) Industrial action and the Law (PL 753)

#### Trade Unions and Professional Associations

Some unions and professional associations have issued their own guidelines. These include the following:

Confederation of Health Service Employees (COHSE) Electrical Electronic Telecommunications and Plumbing Union (EETPU)

General Municipal Boilermakers and Allied Trades Union (GMBATU)

Institution of Professional Civil Servants (IPCS)

National Communications Union (NCU)

National Union of Public Employees (NUPE)

Society of Civil and Public Servants (SCPS)

Transport and General Workers Union (TGWU)

Royal College of Nursing (RCN)

British Medical Association (BMA)

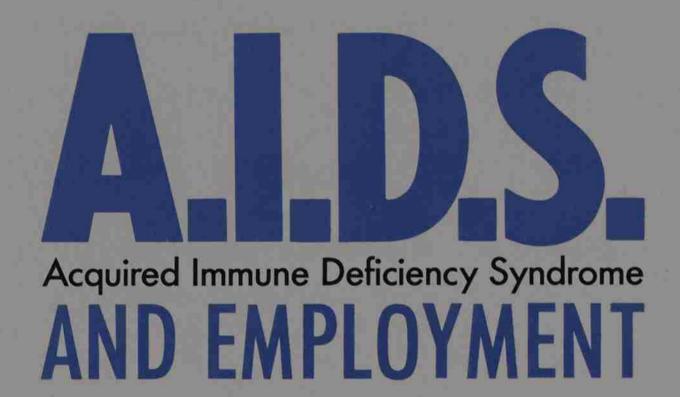
The Hospital Infection Society

The British Society for Haematology

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Department of Employment Deand the Health and Safety Executive

# **FOREWORD**

AIDS is a new and important public health hazard; it has attracted widespread publicity, and ill-informed speculation has caused considerable alarm. Much is now known about the condition and the virus responsible for it, although an effective cure has not yet been found. The major need at present is to prevent further spread of infection by ensuring that people know how it is transmitted and information on this is already available from various sources. Some of these sources are listed in the Annex to this booklet.

It is natural that specific questions should be asked about the implications for employment. There is in particular a need to put to rest groundless fears by providing the facts about AIDS and to prevent discrimination against individuals. In most jobs there is little or no risk of becoming infected.

This booklet attempts to answer the major questions which have been asked about employment aspects but it is also a contribution to a wider public information campaign. It has been issued jointly by the Department of Employment and the Health and Safety Executive and was compiled with the help and advice of doctors and specialists. It is based on the latest available scientific and medical information but does not attempt to cover all aspects. It also provides general guidance on legal obligations but should not be regarded as a complete or authoritative statement of the law.

After reading this booklet you may wish to seek more specific guidance on a particular point. The Annex lists a number of organisations which make information available.

## Occupational health

The Health and Safety Executive (HSE) covers the health, safety and welfare of persons at work (and the public who may be affected by work activity).

The Employment Medical Advisory Services (EMAS). This is part of the HSE and has a national network of doctors and nurses available to give free advice to employers, employees and trade unions about all occupational health matters including AIDS.

Addresses and telephone numbers of both HSE and EMAS are listed in local telephone directories under Health and Safety Executive.

Employer's own company doctor/occupational health scheme.

LAV/HTLV-III — The Causative Agent of AIDS and Related Conditions — Revised Guidelines — issued jointly by the Health and Safety Executive (HSE) and the Department of Health and Social Security. These guidelines which have been prepared by the Advisory Committee on Dangerous Pathogens, include an assessment of the risk of infection, describe precautionary measures which are applicable generally, and give detailed guidance for those in the health care occupations.

General information for doctors (CMO(85)7 DHSS May 1985).

Infection control guidelines for community care of AIDS patients and other HTLV-III positive clients (DHSS 1985).

Advice to fire officers and police (Home Office 1985).

Guidance for surgeons, anaesthetists, dentists and their teams in dealing with patients infected with HTLV-III (CMO(86)7 DHSS April 1986).

# ANNEX FURTHER INFORMATION

#### General

Health Education Council, 78 New Oxford Street, London WC1A 1AH. Single copies of a free booklet AIDS—what everybody needs to know may be obtained by writing to Dept A, PO Box 100, Milton Keynes MK1 1TX. Extra copies may be obtained from the local health education unit (listed in the telephone book under the name of the local Health Authority).

Healthline Telephone Service 01-981 2717, 01-980 7222, (0345) 581151 for up-to-date information on AIDS. This is a confidential 24-hour service provided by the College of Health. (If you are phoning from outside London, use the 0345 number and you will be charged at local rates.)

Department of Health and Social Security AIDS Unit, Alexander Fleming House, Elephant and Castle, London SE1 6BY. Telephone 01-403 1893.

Welsh AIDS Campaign, c/o Health Education Advisory Committee for Wales (HEACW), Secretariat, Room 2003, Welsh Office, Cathays Park, Cardiff CF1 3NQ. Telephone 0222 823395

Scottish AIDS Monitor, PO Box 169, Edinburgh. Telephone 031-558 1167.

Standing Conference on Drug Abuse (SCODA), 1–4 Hatton Place, London EC1N 8ND. Telephone: 01-430 2341.

Sexually transmitted disease (STD) clinic, Special Clinic or GU (genito-urinary) clinic. Addresses and telephone numbers are in local telephone directories under VD (Venereal Disease).

Terrence Higgins Trust (BM/AIDS), London WC1N 3XX. This is a registered charity which offers help and counselling to infected persons and their relatives and friends. Helpline 01-883 2971 Monday to Friday 7pm—10pm, Saturday and Sunday 3pm—10pm.

London Lesbian and Gay Switchboard. Telephone 01-837 7324.

Haemophilia Society. Telephone 01-407 1010.

## CONTENTS

THEFACTS	Section
What is AIDS? How does infection spread?	1 2
EMPLOYMENT IMPLICATIONS	
Is there a risk of infection at work? Can someone who is infected continue to work? Is there a risk for the public? Do employers need to do anything? Are there any special precautions which first-aiders should follow?	3 4 5 6
EMPLOYMENT RIGHTS	
Should an infected person be recruited? Should an infected employee be dismissed? What are an employee's statutory rights if dismissed? What if employees refuse to work with an infected person	8 9 10 1?
FURTHER INFORMATION  General Occupational health	Annex

Employment and Industrial Relations

Trade Unions and Professional Associations

# THE FACTS

## 1. WHAT IS AIDS?

The initial letters "AIDS" stand for "Acquired Immune Deficiency Syndrome". Following infection by a virus now known as HIV (previously known as LAV/HTLV-III) the body's normal defences against illness may break down. Where this happens an individual is open to infections which otherwise would not have occurred. If a particular form of cancer or serious infection, commonly a type of pneumonia, develops as a result of this breakdown the individual is said to have AIDS, although this does not of course mean that everyone who has cancer or pneumonia has AIDS. Those who develop AIDS will eventually die from their illnesses, but not all individuals who become infected with the virus will necessarily develop AIDS. Some may develop less severe illnesses which are not fatal; some may have no symptoms at all and may even themselves be unaware that they are infected. Up to the end of September 1986, of the 30,000 people in the UK who were thought to be infected 512 had by that date developed AIDS.

## 2. HOW DOES INFECTION SPREAD?

Normal social and work contact with an infected person is safe for both colleagues and the public.

The virus is passed on by sexual intercourse with an infected person or by taking infected blood into your own bloodstream (for example, by using contaminated syringes and needles for drug injections). Although it has been found in many body fluids cases of transmission have been recorded only from blood, semen and possibly breast milk. Infection is not spread through the air (for example, by sneezing or coughing) or by touch. Nor is there any danger from handling objects which have been used by an infected person, or from sharing an office or washroom facilities with them. Studies have shown that there is little or no risk of infection even for members of an infected individual's family who have close non-sexual contact with them, for example, their children.

Further factual information about AIDS is contained in a booklet published by the Health Education Council—see Annex.

# 11. WHAT IF EMPLOYEES REFUSE TO WORK WITH AN INFECTED PERSON?

Employees are more likely to shun infected colleagues when they have only limited information about AIDS and consequently fear that they will themselves become infected. Providing general information, particularly about the methods of transmission, should help to allay fears and lead to a resumption of normal working relationships. It is best though to ensure that the general issues are aired and the facts understood before someone at the workplace is thought to be infected, by which time the climate is likely to have become emotionally charged. Employers, for example, may find it useful to take the initiative in this by circulating information about AIDS (for example, thisbooklet or the Health Education Council's booklet), by articles in house journals or by briefing safety representatives and trade union officials.

If employees refuse to work normally with an infected individual an employer would need to respond as he would to other forms of industrial action and seek a resolution through normal procedures. Dismissing individuals who are infected, or thought to be infected, simply because of pressure from other employees would in many cases expose the employer to a claim for unfair dismissal. And suspending them might serve only to reinforce the groundless fears of their colleagues. The Advisory, Conciliation and Arbitration Service (ACAS) or EMAS (see "further information") may be able to help by providing independent and expert advice. In addition, many trade unions have adopted constructive policies in this area and issued advice of their own. They may also be able to assist in resolving local difficulties.

## 5. IS THERE A RISK FOR THE PUBLIC?

Potential risk to the public arises only where the blood, semen or other body fluids of an infected employee can enter another person's body, for example, through an open wound.

Occupations where this may happen also lie mainly in the health services. Measures to reduce the risk will vary with the exact circumstances but working methods adopted to protect doctors, dentists and other health care workers should also protect members of the public from any risk of infection.

## 6. DO EMPLOYERS NEED TO DO ANYTHING?

Each employer will need to review working methods to see whether there may be a risk of employees or the public coming into contact with infected body fluids.

In general this risk is likely to arise only from accidents and their treatment. The usual good hygiene practices adopted to prevent the spread of infection generally (see section 7) will be sufficient to prevent infection by the AIDS virus.

There is generally no obligation on individuals to disclose their infection or to submit to medical tests for the virus. Anything which can be interpreted as an inquisition into an employee's personal life-style should be avoided. If an employee is known to be infected there may be rare circumstances in which it would be appropriate either for their own safety or the safety of others to consider a move to alternative duties. Knowledge of their infection should however be treated in confidence and disclosed to others only with the employee's permission except where, on the basis of medical advice, it is necessary to protect the safety of others.

Any employer who feels unable to make an informed assessment of the risk should consult the Employment Medical Advisory Service (EMAS) at an area office of the Health and Safety Executive (HSE) — see "further information".

# 7. ARE THERE ANY SPECIAL PRECAUTIONS WHICH FIRST-AIDERS SHOULD FOLLOW?

In any situation requiring first-aid certain precautions already need to be taken to reduce the risk of transmitting other infections, including hepatitis. These standard precautions will be equally effective against the AIDS virus. For example, first-aiders should always cover any exposed cuts or abrasions they may have with a waterproof dressing before treating a casualty whether or not any infection is suspected. They should also wash their hands both before and after applying dressings.

Whenever blood, semen or other body fluids have to be mopped up disposable plastic gloves and an apron should always be worn and paper towels used; these items should then be placed in plastic bags and safely disposed of, preferably by burning. Clothing may be cleaned in an ordinary washing machine using its hot cycle. The AIDS virus is killed by household bleach and the area in which any spills have occurred should be disinfected using one part of bleach diluted with ten parts of water; caution should be exercised as bleach is corrosive and can be harmful to the skin.

If direct contact with another person's blood or other body fluids occurs the area should be washed as soon as possible with ordinary soap and water. Clean cold tap water should be used if the lips, mouth, tongue, eyes or broken skin are affected and medical advice sought.

First-aiders who may be called upon to give mouth-to-mouth resuscitation should be aware that mouthpieces are available for use when carrying out this procedure, but they should only be used by properly trained persons. Mouth-to-mouth resuscitation should never be withheld in an emergency because a mouthpiece is not available. No case of infection has been reported from any part of the world as a result of giving mouth-to-mouth resuscitation.

# **EMPLOYMENT RIGHTS**

## 8. SHOULD AN INFECTED PERSON BE RECRUITED?

Employers are free in law to decide whom they wish to employ but they must not discriminate either directly or indirectly on grounds of sex or race. In almost all occupations there is no risk of an infected person passing the virus on to others, and this would not therefore generally be a reason for treating them any differently from other job applicants.

## 9. SHOULD AN INFECTED EMPLOYEE BE DISMISSED?

Employees have statutory rights against unfair dismissal (outlined in paragraph 10) which are not reduced in any way just because an individual is infected. In any case, there are generally no grounds for dismissal purely on the basis that an employee has become infected. Employers will need to take a reasoned view based on all the circumstances, weighing up factors such as the individual's ability to continue working satisfactorily, the possibility of a move to different duties, any medical advice received, and whether continued employment is against the employee's, the employer's or the public's interest.

## 10. WHAT ARE AN EMPLOYEE'S STATUTORY RIGHTS IF DISMISSED?

Employment legislation gives an employee who has been employed for two years or more (one year for those who started work before 1 June 1985 in firms which employ more than 20 people) the right to make an application to an industrial tribunal on the ground that the dismissal was unfair. There is no minimum qualifying period of employment where the reason for the dismissal is alleged to be sex or race discrimination. The tribunal will then decide whether dismissal was a reasonable response to the situation taking into account all the circumstances. If a tribunal decides that the dismissal was unfair or discriminatory, it can order the employer to re-employ or compensate the individual.

See "further information" for sources of advice about unfair dismissal.

## **EMPLOYMENT IMPLICATIONS**



## 3. IS THERE A RISK OF INFECTION AT WORK?

There is no risk where there is no direct contact with the blood, semen or other body fluids of infected individuals. Few jobs involve contact with these and the majority of employees are therefore safe from infection whilst at work.

There are jobs in the health care services which can involve some risk. Doctors, nurses, dentists, laboratory and hospital support staff may come into close contact with infected blood, semen or other body fluids and there is therefore the possibility of infection through a cut or accidental injection. The only other groups of workers who may face a risk are those which have incidental exposure to blood, semen or other body fluids in the course of their work. These might include community, welfare, custodial and emergency service workers and those responsible for the retrieval and disposal of bodies, but there have been no reported cases of infection arising from these activities.

Workers who look after patients and deal with their blood, semen or other body fluids already face a risk from other infections. Many of the standard precautions in use are equally effective against the AIDS virus. Specific additional advice on precautions to reduce the risk of infection by the AIDS virus has nonetheless been prepared for these workers. Training and hygiene practices generally are being reviewed to ensure that they are satisfactory. Occupational codes of practice may also refer to the risk of infection and ways to minimise it.

See "further information" for sources of advice and help.

## 4. CAN SOMEONE WHO IS INFECTED CONTINUE TO WORK?

As with many other illnesses, someone who is infected should be able to work as normal whilst medically fit to do so.

Most individuals who have been infected with the virus will continue working, although those who actually suffer from one or more of the related illnesses may not be well enough to work all the time. If in doubt medical advice should always be sought.