

United States General Accounting Office

GAO

Comptroller General's Task Force on
AIDS in the Workplace

December 1987

Coping With AIDS in the GAO Workplace

**Summary of Results
and Recommendations**

Contents

Abstract	2
Summary	4
Some Basics on AIDS	4
What is AIDS?	4
How is AIDS Diagnosed?	4
How is AIDS Transmitted?	5
How Widespread is AIDS?	5
Task Force Recommendations and Their Rationale	6
GAO Guidelines Concerning Employees with AIDS and Their Coworkers	6
Action Plan	7

Abbreviations

AIDS	<i>acquired immune deficiency syndrome</i>
CDC	Centers for Disease Control
HIV	human immunodeficiency virus
GAO	General Accounting Office
OGC	Office of the General Counsel
OOHD	Office of Organization and Human Development

Abstract

In December 1986, the Comptroller General established a GAO Task Force to determine how the growing incidence of AIDS could be expected to affect GAO and to identify any policy clarifications or changes needed to respond appropriately to this problem. The Task Force was chaired by Eleanor Chelinsky, and its members included Felix Brandon, Richard Brown, John Cherbini, Judy England-Joseph, Ira Goldstein, Murray Grant, Mary Hamilton, James Hinchman, David Littleton, and Herbert McLure. They were assisted by staff from the Office of Organization and Human Development; the Program Evaluation and Methodology Division; the Offices of the General Counsel, General Services and Controller, and Personnel; and representatives of several GAO employee organizations.

The full report of the Task Force sketches the methods the Task Force used to fulfill its mandate and proposes guidelines and an action plan to deal with AIDS in the GAO workplace. It also includes appendixes on particular aspects of AIDS, prepared for the Task Force by individual members and their staffs. The present document, intended for distribution to all GAO employees, summarizes the Task Force's results and recommendations.

The Task Force found a clear consensus in the medical and scientific community that typical workplace interaction bears no risk of AIDS transmission. It therefore recommends that the following GAO guidelines concerning the rights and responsibilities of managers, of employees with AIDS, and of their coworkers be promulgated:

- GAO intends to maintain a safe and healthful work environment for all GAO staff.
- Freedom from AIDS is not a condition for hiring or continued employment.
- An employee's health condition is private and confidential. An employee with AIDS is under no obligation to disclose his/her condition to a supervisor or any other GAO staff.
- GAO will make every effort to offer reasonable accommodation for the employee with AIDS. These efforts will be consistent with accommodations offered to employees suffering from other life-threatening illnesses.

The action plan developed by the Task Force involves the following major components:

Abstract

Education and Counseling	During its deliberations, the Task Force had begun an effort to educate GAO employees about AIDS by distributing the Surgeon General's report GAO-wide. It now further recommends that GAO initiate education sessions for all employees to discuss the GAO guidelines and their rationale. The Task Force had also published resource guides listing community facilities for AIDS counseling and testing for the use of GAO employees at headquarters and in the regional offices who might want to discuss their concerns with a qualified professional. The Task Force further recommends that GAO provide expert and confidential counseling, in-house, for employees with AIDS and their coworkers.
Managerial Guidelines	Guidelines have been prepared to help managers deal with AIDS in the workplace. They focus on the practical problems managers face, using a question-and-answer format. The Task Force recommends that the guidelines be made available to managers within each unit at their request.
Managerial Focal Points	The Task Force recommends the designation of an individual within each unit at the deputy director or assistant regional manager level to act as a focal point for AIDS, handling personnel issues and serving as a resource person and an intermediary.
Monitoring	Because of the rapidly expanding state of knowledge about AIDS, the Task Force recommends continued monitoring of scientific and legal developments related both to AIDS and to the successful implementation of its guidelines.

Copies of this report, the full report of the Comptroller General's Task Force on Coping with AIDS in the GAO Workplace, and Managers' Guidelines for Dealing with Individual Cases of AIDS are available for sale from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402.

Summary

Some Basics on AIDS

The following pages summarize the background medical information that the Task Force reviewed in formulating its recommendations. A more detailed and authoritative source of AIDS information is the U.S. Surgeon General's report on AIDS,¹ copies of which have been distributed to all GAO employees.

What Is AIDS?

Acquired immune deficiency syndrome, or AIDS, is a fatal disease that cripples the body's immune system by destroying certain white blood cells (known as T-lymphocytes). This destruction is caused by a virus called human immunodeficiency virus (HIV). Because of the damage to the immune system, the AIDS patient becomes vulnerable to infections that healthy individuals can usually resist. The most common of these opportunistic infections are Kaposi's sarcoma (a type of cancer characterized by multiple purplish blotches on the skin) and a form of pneumonia known as pneumocystis carinii. The virus can cause brain damage as well.

Persons infected by the virus may have no symptoms at all and remain apparently healthy for years after infection. The incubation period of the disease has not been definitively determined, in part because scientists became aware of the disease only in the early 1980's. The virus can remain dormant for 5 years or more, and its incubation period may extend to 10 or more years.

How Is AIDS Diagnosed?

In the first few years after the disease was identified, a diagnosis was usually made on the basis of a depressed immune system and secondary infections characteristic of the disease. Once scientists had established HIV as the source of the disease, it became possible to identify persons infected with that virus—who had not developed AIDS—through blood tests for antibodies to the virus.

The prognosis for persons whose blood tests positive for HIV antibodies is unclear. Some may never have AIDS symptoms, others may present mild symptoms, and others will develop AIDS. Scientists are not certain how many of the HIV-infected persons will eventually develop AIDS. Common estimates now range from 30 to 50 percent, but some suggest that everyone infected with the virus will sooner or later succumb to AIDS.

¹U.S. Department of Health and Human Services, Surgeon General's Report on Acquired Immune Deficiency Syndrome (Jan. 1987).

Other uncertainties are associated with the blood tests. Because the body may take several months to produce sufficient HIV antibodies for the test to detect, a person only recently infected may test falsely negative. When a low-risk population is screened for AIDS, a large proportion can be incorrectly identified as positive. Therefore, positive results of an initial screening must be confirmed by additional tests.

How Is AIDS Transmitted?

AIDS is transmitted, as far as is known, either through sexual contact or through direct blood-to-blood transmission such as that which occurs in blood transfusions or in sharing needles by intravenous drug users. In many cases, AIDS is transmitted by a person who is infected with HIV but shows no active AIDS symptoms.

HIV is not robust. It does not live long in the open air, and it is not transmitted by casual contact with an AIDS carrier. AIDS is not communicated by shaking hands, hugging, crying, sneezing, coughing, insect bites, or by eating food prepared by an AIDS patient. Typical workplace interaction bears no risk of HIV transmission.

How Widespread Is AIDS?

As of August 1987, more than 41,000 AIDS cases had been identified in the United States and nearly 24,000 people had died of it. Common estimates of the number of HIV-infected Americans range from 1 million to 2 million.

Reported AIDS cases in the United States are concentrated most heavily among a few high-risk groups and in a small number of urban areas. About 90 percent of cases involve homosexual or bisexual males and/or intravenous drug abusers. Only 4 percent have thus far involved heterosexual transmission. Other groups with elevated risk of HIV infection are children born to infected mothers and those who received multiple blood transfusions before blood screening was routinely performed by blood donation centers (in general, before 1985). For this reason, hemophilia, a condition that may require frequent transfusions, is also considered a risk factor for AIDS.

At the time of this writing, 70 percent of all AIDS cases have been reported from only five states: New York, California, Florida, Texas, and New Jersey. The metropolitan areas of New York City, San Francisco, Los Angeles, Houston, and Washington, D.C., which account for slightly more than 10 percent of the country's population, contain more than half of the reported AIDS cases in the United States.

Predictions of the form and magnitude that the AIDS epidemic will assume over the next several years are difficult to make precisely. Last year the U.S. Public Health Service projected that, by the end of 1991, the total number of AIDS cases in the United States would exceed 270,000, with more than 179,000 deaths. A key determinant of the size of the future epidemic in this country will be the rate of heterosexual transmission. Some scientists foresee an explosion of the epidemic into the general population once it is solidly established among heterosexuals. However, the reported rate of heterosexual transmission has failed to increase substantially over the past year and some doubt has been cast on the more dire predictions. Because the virus can lie dormant for so many years before AIDS symptoms appear, questions regarding the future size and shape of the epidemic cannot now be answered definitively. But most Americans are likely to come into contact with someone having AIDS sometime in the next few years. Many of these interactions will occur in the workplace and can be expected to involve federal agencies and organizations, including GAO, as frequently as their counterparts in the private sector.

Task Force Recommendations and Their Rationale

The Task Force report contains two general recommendations: first, that GAO guidelines concerning the rights and responsibilities of managers, of employees with AIDS, and of their fellow employees be promulgated and, second, that an action plan be implemented to inform GAO staff and ensure that these guidelines are followed consistently throughout the Office. The following pages provide specific details of these general recommendations and summarize the findings upon which they were based.

GAO Guidelines Concerning Employees With AIDS and Their Coworkers

The Task Force recommends that the following policy be adopted at GAO and that a copy of it be distributed to every employee:

On the basis of available medical and scientific information, the U.S. General Accounting Office recognizes that acquired immune deficiency syndrome (AIDS) is a life-threatening illness that is not transmissible under ordinary GAO work conditions. Therefore, GAO has determined that the following four principles will guide its personnel procedures:

- GAO intends to maintain a safe and healthful work environment for all GAO staff. Because all medical evidence indicates that AIDS is not transmitted in a typical office environment, staff will be expected to continue working relationships with any fellow employee who is recognized as having AIDS. To help allay any coworkers' fears of catching the disease,

and to prepare them to cope with its effects in the workplace, GAO will offer education and counseling to any coworkers concerned about the possibility of AIDS infection or other deleterious consequences of this situation.

- Freedom from AIDS is not a condition for hiring or continued employment. Neither a clinical diagnosis of AIDS nor the presence of the HIV antibody in the bloodstream constitutes sufficient reason to deny employment to an otherwise qualified applicant or to dismiss an employee so long as he/she can meet acceptable performance standards and medical evidence indicates that his/her condition is not a threat to others.
- An employee's health condition is private and confidential. An employee with AIDS is under no obligation to disclose his/her condition to a supervisor or to any other GAO staff. However, the employee is strongly encouraged to make the condition known as soon as possible to the proper management level in order to receive informed advice on tailoring the use of appropriate employee benefits to his/her situation. Any disclosure by an employee with AIDS will be maintained in strict confidence in accordance with the specific guidelines for managerial focal points (see pp. 9 and 10); the manager must take all reasonable precautions to protect this information from unauthorized disclosure.
- GAO will make every effort to offer reasonable accommodation for the employee with AIDS. These efforts will be consistent with accommodations offered to employees suffering from other serious illnesses. This accommodation may include, but will not be limited to, flexible or part-time work schedules, advance sick leave, light duty assignments, working at home, and voluntary reassignment.

The shape and scope of this policy reflect underlying principles of GAO's management philosophy. It is based on a review of federal personnel laws and regulations, along with the best available medical information on AIDS. (See appendixes I and II of the full Task Force report.)

Action Plan

To facilitate the consistent implementation of these guidelines, the Task Force recommends that several initiatives be implemented GAO-wide and that GAO's progress toward providing both humane treatment for the employee with AIDS and a safe, healthful, and productive work environment be continually monitored.

Education and Counseling Program

As a first step in ensuring that all employees have adequate information about GAO's AIDS policy, the Task Force recommends that a summary of

its results and recommendations be distributed throughout GAO and that several copies of its full report be distributed to, and made generally available within, each administrative unit. In addition, it recommends that continuing education efforts be made with the following objectives:

- People suffering from AIDS should understand what GAO's policy is toward them and should know how to get the support available to them.
- Managers and staff should also understand GAO's policy and how to protect all employees' rights, reassure employees who are not ill, and assist employees needing help.
- All GAO employees should have the opportunity to be well-informed about AIDS.

The Task Force recommends a program consisting of a 1- to 2-hour session moderated by a GAO manager at the deputy director or assistant regional manager level. During the session, a commercially produced videotape on AIDS in the workplace would be viewed and GAO's AIDS guidelines discussed. This discussion would include the following considerations:

- Managers are responsible for familiarity with current GAO policy and with the resources available within GAO for clarifying and interpreting it.
- Managers are obliged to protect the confidentiality of GAO staff's personal health information.
- Managers should provide reasonable accommodations for persons suffering from AIDS or other life-threatening illnesses.
- Managers should be familiar with information and counseling resources available within and outside GAO for employees with AIDS and for their concerned coworkers.
- All staff should recognize that AIDS presents no threat of infection in typical workplace interaction and that an employee with AIDS has a right to expect humane treatment from supervisors and coworkers.

The detailed curriculum and resource material for the education program would be developed, and managers would be trained, under the direction of the Office of Organization and Human Development (OOHD). After completion of the initial education program, the managers would continue to serve as focal points. (See below.) In addition, OOHD would provide any necessary training for its counseling staff to ensure their ability to offer appropriate and confidential services to employees with AIDS and their concerned coworkers.

The Task Force has already developed and published a series of resource guides to existing AIDS-related services. OOHG would maintain updated lists of these resources for the geographical areas in which GAO's headquarters and regional offices are located.

The recommendation for an education and counseling program resulted from a review of AIDS programs initiated in other organizations; from interviews with knowledgeable persons and institutions outside GAO; and from consistent suggestions by GAO management, staff, and employee organizations. All sources agreed on the need for ensuring a common understanding within GAO about the nature of AIDS, the implications of its presence in the workplace, and GAO's policies for dealing with it.

Managerial Guidelines

The Task Force also recommends that a set of specific management-oriented guidelines be made available to all managers to help them when they are confronted with a case of AIDS in the workplace. These guidelines are contained in appendix IX of the full report. They outline GAO policy on AIDS and address issues such as the confidential nature of an employee's health condition, the sources of assistance which a manager can recommend to an employee with AIDS, reasonable accommodation for an employee with AIDS, employee benefits, coworker concerns about AIDS transmission, and AIDS testing. The document also answers some common questions to which the supervisor may need to respond.

The idea of managerial guidelines emerged from the review undertaken by the Task Force of previous AIDS cases at GAO (see appendix III of the full report), and they were requested by some GAO employee organizations. Their content is based on the legal review performed by OGC and on the interviews performed by the Task Force with other organizations that had established AIDS policies. (See appendix VIII of the full report.)

Managerial Focal Points

The Task Force recommends that each unit head (that is, assistant comptroller general, division director, regional manager, or office director) designate one staff member—at the deputy director or assistant regional manager level—to serve as a focal point for personnel issues related to AIDS. This individual would become knowledgeable about employee rights, benefit packages, and other personnel issues likely to be of concern to employees with AIDS, their supervisors, and coworkers. In addition to assuring education on AIDS for everyone in his/her unit, this person would also arrange for other meetings, as needed, in which

staff members could raise questions about AIDS and hear the views of GAO managers, Task Force members, and/or outside experts. This individual would also serve, with the consent of the employee who has AIDS, as the intermediary between the employee and GAO management in order to obtain any needed policy clarifications and to expedite special personnel arrangements, if necessary. The designated focal point would maintain all personal health information in strict confidence; that is, the information could be discussed only with staff in a direct supervisory chain above the employee and only as needed to maintain office productivity or to help the employee obtain necessary modifications to his/her working conditions.

The need for a specified focal point emerged from the Task Force review of how GAO had handled previous AIDS cases. (See appendix III of the full report.) In at least one case, the management of an AIDS situation would have been greatly facilitated by the existence of a focal point.

Employee Benefits

The Task Force reviewed existing employee benefits and personnel practices and found them generally adequate to meet the needs of an employee with AIDS. Most health insurance plans cover the majority of health expenses associated with AIDS, and present personnel policies are sufficiently flexible to offer reasonable accommodation to an employee with AIDS who wishes to continue working. However, because the plans differ substantially in their coverage for out-of-hospital expenses, the Task Force recommends that Personnel make available a brief summary of these variations during the annual open season. In addition, its AIDS case study review suggested that unnecessary delays in processing requests for disability retirement could occur. The Task Force, therefore, recommends that Personnel act to expedite the approval of such requests by the Office of Personnel Management.

Public Health Considerations Concerning AIDS in the Workplace

The Task Force found no reason to recommend any changes in the established personnel policies and maintenance practices at GAO because of the likelihood of AIDS in the workplace. It based this conclusion on a review it conducted of public health rules that must be considered in developing workplace guidelines on AIDS. (See appendix I of the full report.)

The review indicated that the presence of AIDS in the typical workplace does not pose a public health hazard. The Public Health Service states that "there is no known risk of AIDS virus transmission" for "persons in

settings such as offices, schools, factories and construction sites."² Even in the case of food service workers, the Centers for Disease Control see no public health reason why workers infected with AIDS should be restricted from preparing or serving food and observe that following recommended standards of good personal hygiene and food sanitation suffices in this area. The Task Force concluded, therefore, that extra health measures specific to AIDS were not required in the GAO workplace.

The Task Force does not recommend employee blood tests for AIDS on the following grounds:

- AIDS poses no risk of transmission under ordinary office working conditions.
- Current tests do not screen for AIDS itself but rather for antibodies to HIV; whether and when someone testing positive for HIV will develop AIDS is unknown.
- Testing employees or applicants for employment could be viewed as discriminatory under current law.

Periodic Review of Policy Implementation

The Task Force recommends that

- scientific and legal developments related to AIDS continue to be monitored by GAO;
- the implementation of the GAO guidelines on AIDS be periodically reviewed in light of their objectives to provide humane treatment to employees with AIDS and a safe, healthful, and productive office environment for all staff;
- these tasks be monitored by a standing group of three members of the present Task Force (the Director of Personnel, the Chief Medical Advisor, and the General Counsel); and
- the Task Force reconvene annually to receive a report on these reviews and consider modifications to its policy recommendations. Additional meetings would be held if significant developments warranted policy consideration.

In formulating these recommendations, the Task Force has recognized that new developments in our understanding of AIDS occur almost daily. The recommendations are based on the best currently available medical,

²"Summary: Recommendations for Preventing Transmission of Infection with Human T-Lymphotropic Virus Type III/Lymphadenopathy-Associated Virus in the Workplace," Morbidity and Mortality Weekly Report (Atlanta, Ga.: U.S. Dept. of Health and Human Services, Public Health Service, Centers for Disease Control, Vol. 34, No. 45, Nov. 15, 1985), pp. 681-695.

scientific, and legal expertise. However, the law could change, there could be important new knowledge about AIDS, and the accelerating search for a cure for and a vaccine against this disease could well prove successful sooner than expected. The Task Force also recognizes that the United States can expect to know within the next few years whether the spread of AIDS in this country will be self-limiting or whether an explosion of the disease into the general population should be anticipated. This knowledge will help to determine the nature of the public policy response to the problem.

In conclusion, the Task Force expresses its conviction that the goals of its recommendations are achievable. It seems eminently possible, given the nature and means of transmission of AIDS, to maintain a safe, healthful, and productive work environment for all employees while simultaneously ensuring humane treatment to those employees suffering from the disease. In general, the Task Force's recommendations flow from the view, derived from its research, that the major source of AIDS problems in the workplace will not be the disease itself but fear and ignorance about it. The Task Force hopes that its recommended program will allow GAO to continue both to fulfill its obligations to its employees—all of them—and to maintain its commitment of service to the Congress.

Copies are available for sale from the:

Superintendent of Documents
U.S. Government Printing Office
Washington, D.C. 20402

