

RONDEBOSCH BOYS' PREPARATORY SCHOOL – SGB POLICIES

POLICY: AIDS POLICY

POLICY REF. NO. A2/08/2008 (Rev No. 0)

DATE: 6 AUGUST 2008

NOTE: This policy is based on the National Education Policy Act, 1996 (No:27 of 1996), UCT Aids Policy and Independent Schools Aids Policies.

DEFINITIONS:

AIDS: means the acquired immune deficiency syndrome, that is the final phase of HIV infection.

HIV: means the human immunodeficiency virus.

SEXUAL ABUSE: means abuse of a person targeting their sexual organs, e.g. rape, touching their private parts, or inserting objects into their private parts.

UNFAIR DISCRIMINATION: means direct or indirect unfair discrimination against anyone on one or more grounds in terms of the Constitution of the Republic of South Africa, 1996 (Act No:108 of 1996).

UNIVERSAL PRECAUTIONS: refers to the concept used world wide in the context of HIV/AIDS to indicate standard infection control procedures or precautionary measures aimed at the prevention of HIV transmission from one person to another and includes procedures concerning basic hygiene and the wearing of protective clothing such as latex or rubber gloves or plastic bags when there is a risk of exposure to blood, bloodborne pathogens or blood-stained body fluids.

VIOLENCE: means violent conduct or treatment that harms the person of the victim, for example assault and rape.

WINDOW PERIOD: means the period of up to three months before HIV antibodies appear in the blood following HIV infection. During this period HIV tests cannot determine whether a person is infected with HIV or not.

PREMISES

Although there are no known cases of the transmission of HIV in schools or institutions, there are learners with HIV/AIDS in schools.

HIV cannot be transmitted through day-to-day social contact.

Because of the increase in infection rates, learners and educators with HIV/AIDS will increasingly form part of the population of schools and institutions.

Because of the nature of HIV antibody testing and the “window period” or “apparently well period” between infection and the onset of clearly identifiable symptoms, it is impossible to know with absolute certainty who has HIV/AIDS and who does not.

Compulsory disclosure of a learner’s, educator’s or member of the support staff HIV/AIDS status to school authorities is not advocated as this would serve no meaningful purpose.

The constitutional rights of all learners must be protected on an equal basis.

Learners must receive education about HIV/AIDS.

All educators should be trained to give guidance on HIV/AIDS.

POLICY

1. Non-Discrimination and Equality with regard to Learners and Educators and support staff with HIV/AIDS.
 - 1.1 No learner, educator or member of the support staff with HIV/AIDS may be unfairly discriminated against directly or indirectly.
 - 1.2 Learners, educators and other staff with HIV/AIDS should be treated in a just, humane and life-affirming way.
 - 1.3 Any special measures in respect of a learner or educator with HIV should be fair and justifiable in the light of medical facts; established legal rules and principles; ethical guidelines; the best interest of the learner, and educator with HIV/AIDS; school or institution conditions; and the best interest of other learners and educators.
2. **Admission of Learners to a School or the Appointment of Educators**
 - 2.1 No learner will be denied admission to or continued attendance at the school on account of his HIV/AIDS status or perceived HIV/AIDS status.
 - 2.2 No educator may be denied the right to be appointed in a post, to teach or to be promoted on account of his or her HIV/AIDS status or perceived HIV/AIDS status. HIV/AIDS status may not be a reason for dismissal of an educator, nor for refusing to conclude or continue, or renew staff member's employment contract while the staff member is able to work effectively. As with other chronic illnesses, if work is affected and after objective medical assessment, reasonable efforts will be undertaken to provide alternative, non-strenuous work, so as to maximise earning capacity. If the person is no longer able to work and/or no suitable position can be found, the appropriate ill-health policies will apply. UCT]
3. **Attendance at Rondebosch by learners with HIV/AIDS**
 - 3.1 The needs of learners with HIV/AIDS with regard to their right to basic education should as far as is reasonably practicable be accommodated in the school.
 - 3.2 Learners with HIV/AIDS are expected to attend classes in accordance with statutory requirements for as long as they are able to do so effectively.
 - 3.3 If and when learners with HIV/AIDS become incapacitated through illness, the school will make work available to them for study at home and will support continued learning where possible.
 - 3.4 Children suffering from HIV/AIDS are particularly susceptible to infections especially measles and chicken pox. If these infections occur in the school, it is advisable that in consultation with the parents the child suffering from HIV/AIDS should be removed from the school for the duration of the incubation period of that disease.
4. **Disclosure of HIV/AIDS related Information and confidentiality**
 - 4.1 No learner (or parent on behalf of a learner) or member of staff is compelled to disclose his or her HIV/AIDS status to the school.

- 4.2 Voluntary disclosure of a learner's or member of staff's HIV/AIDS status to the appropriate authority should be welcomed and an enabling environment should be cultivated in which the confidentiality of such information is ensured and in which unfair discrimination is not tolerated.
- 4.3 A holistic programme for life-skills and HIV/AIDS education should encourage disclosure.
- 4.4 Any person to whom any information about the medical condition of a learner or member of staff with HIV/AIDS has been divulged, must keep this information confidential.
- 4.5 Unauthorised disclosure of HIV/AIDS related information could give rise to legal liability.
- 4.6 In line with legal prescription, the Rondebosch Boys' Schools will not require an applicant for a job to undergo an HIV test before he/she is considered for employment.

5. A Safe School Environment

- 5.1 The basis for advocating the consistent application of universal precautions lies in the assumption that in situations of potential exposure to HIV, all persons are potentially infected and all blood should be treated as such. All blood, open wounds, sores, breaks in the skin, grazes and open skin lesions, as well as all body fluids and excretions which could be stained or contaminated with blood (for example: tears, saliva, mucous, phlegm, urine, vomit, faeces and pus) should therefore be treated as potentially infectious.
 - a) Blood, especially in large spills such as from nosebleeds, and old blood or blood stains, should be handled with extreme caution.
 - b) Skin exposed accidentally to blood should be washed immediately with soap and running water.
 - c) All bleeding wounds, sores, breaks in the skin, grazes and open skin lesions should ideally be cleaned immediately with running water and/or other antiseptics.
 - d) If there is a biting or scratching incident where the skin is broken, the wound would be washed and cleansed under running water, dried, treated with antiseptic and covered with a waterproof dressing.
 - e) Blood splashes to the face (mucous membranes of eyes, nose or mouth) should be flushed with running water for at least three minutes.
 - f) Disposable bags must be made available to dispose of sanitary ware.
- 5.2 All open wounds, sores, breaks in the skin, grazes and open skin lesions should at all times be covered completely and securely with a non-porous or waterproof dressing or plaster so that there is no risk of exposure to blood.
- 5.3 Cleansing and washing should always be done with running water and not in containers of water. Where running tap water is not available, containers should be used to pour water over the area to be cleaned.
- 5.4 All persons attending to blood spills, open wounds, sores, breaks in the skin, grazes, open skin lesions, body fluids and excretions should wear protective latex gloves or plastic bags over their hands to eliminate the risk of HIV transmission effectively.

- 5.5 If the surface has been contaminated with body fluids and excretions which could be stained or contaminated with blood (for instance tears, saliva, mucous, phlegm, urine, vomit, faeces and pus) their surface should be cleaned with running water and fresh, clean household bleach (1:10 solution) and paper or disposable cloths. The person doing the cleaning must wear protective gloves or plastic bags.
- 5.6 If instruments (for instance scissors) become contaminated with blood or other body fluids, they should be washed and placed in a strong household bleach solution for at least one hour before drying and re-using.
- 5.7 Each classroom or other teaching area must have a pair of latex or household rubber gloves.
- 5.8 Latex or household rubber gloves should be available at every sports event and should also be carried by the playground supervisor.
- 5.9 First-aid kits and appropriate cleaning equipment should be stored in one or more selected rooms in the school or institution and should be accessible at all times, also by the playground supervisor. The contents of the first-aid kits, or the availability of other suitable barriers, should be checked against a contents list by a designated staff member of the school or institution. Expired and depleted items should be replaced immediately.
- 5.10 A fully equipped first-aid kit should be available at all school or institution events, outings and tours, and should be kept on vehicles for the transport of learners to such events.
- 5.11 Learners, should be instructed never to touch the blood, open wounds, sores, breaks in the skin, grazes and open skin lesions of others, nor to handle emergencies such as nosebleeds, cuts and scrapes of friends on their own.
- 5.12 All cleaning staff, learners, educators and parents should be informed about the universal precautions that will be adhered to at school.
- 5.13 A copy of this policy will be kept in the secretaries' offices.

6 Prevention of HIV Transmission during Play and Sport

The risk of HIV transmission as a result of contact play and contact sport is generally insignificant.

- 6.1 No learner or educator may participate in contact play or contact sport with an open wound, sore, break in the skin, graze or open skin lesion.
- 6.2 If bleeding occurs during contact play or contact sport, the injured player should be removed from the playground or sports field immediately and treated appropriately.
- 6.3 Blood stained clothes must be changed.
- 6.4 The same precautions should be applied to injured educators and other staff members.
- 6.5 A fully equipped first-aid kit should be available wherever contact play or contact sport takes place.

7. Education on HIV/AIDS

- 7.1 A continuing life-skills and HIV/AIDS education programme will be implemented at this school.

7.2 Age-appropriate education on HIV/AIDS will form part of the curriculum for all learners. This should include the following:

- 7.2.1 providing information on HIV/AIDS and developing the life skills necessary for the prevention of HIV transmission;
- 7.2.2 inculcating from an early age onwards basic first-aids principles, including how to deal with bleeding with the necessary safety precautions;
- 7.2.3 emphasising the role of drugs, sexual abuse and violence, and sexually transmitted diseases (STDs) in transmission of HIV, and empowering learners to deal with these situations.
- 7.2.4 teaching learners how to behave towards persons with HIV/AIDS, raising awareness on prejudice and stereotypes around HIV/AIDS.
- 7.2.5 cultivating an enabling environment and a culture of non-discrimination towards persons with HIV/AIDS and
- 7.2.6 education and information regarding HIV/AIDS must be given in an accurate and scientific manner and in language and terms that are understandable.

8 Duties and Responsibilities of Learners, Educators and Parents

- 8.1 Parents of all learners are expected to require learners to observe all rules aimed at preventing behaviour which may create a risk of HIV transmission; and
- 8.2 Parents are encouraged to take an active interest in acquiring any information or knowledge on HIV/AIDS supplied by the school and to attend meetings convened for them by the school.
- 8.3 It is recommended that a learner or educator with HIV/AIDS and his parents, in the case of learners, should consult medical opinion to assess whether the learner, or educator, owing to his or her condition or conduct, poses a medically recognised significant health risk to others. If such a risk is established, the principal of the school should be informed. The principal of the school must take the necessary steps to ensure the health and safety of other learners, educators and staff members.
- 8.4 Educators have a particular duty to ensure that the rights and dignity of all learners and educators are respected and protected.

9. Refusal to study with or teach a learner with HIV/AIDS, or to work with or be taught by an educator with HIV/AIDS

- 9.1 Refusal to study with a learner or to work with or to be taught by an educator or other staff member with, or perceived to have HIV/AIDS, should be pre-empted by proving accurate and understandable information on HIV/AIDS to all educators, staff members, learners and their parents.
- 9.2 Learners who refuse to study with a fellow learner or be taught by an educator or educators and staff who refuse to work with a fellow educator or staff member or to teach or interact with a learner or perceived to have HIV/AIDS and are concerned that they themselves will be infected, should be counselled.

SIGNED:

Chairman RBPS Governing Body