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LEGISLATIVE FRAMEWORK

1) HEALTH ACT 1977.

2) EMPLOYMENT OF EDUCATORS ACT OF 1998.


4) THE CODE OF CONDUCT FOR LEARNERS .

5) THE CODE OF PROFESSIONAL ETHICS FOR EDUCATORS.
1] NON-DISCRIMINATION AND EQUALITY WITH REGARD TO LEARNERS AND EDUCATORS / STAFF MEMBERS WITH HIV/AIDS.

a. No learner, educator or non-educator may be unfairly discriminated against directly or indirectly. All staff members should be alert to unfair accusations against any person suspected of having HIV/AIDS.
b. Learners, educators or non-educators with HIV/AIDS will be treated in a just, humane and life-affirming way.
c. Any measures in respect of any learner or staff member with HIV/AIDS will be fair and justifiable in the light of medical facts, established legal rules and principles, ethical guidelines and in the best interest of all learners and school conditions.
d. To prevent discrimination all learners and staff members will be educated about fundamental rights as contained in the Constitution of the Republic of South Africa.

2] HIV/AIDS TESTING AND THE ADMISSION OF LEARNERS TO THE SCHOOL OR THE APPOINTMENT OF EDUCATORS / NON-EDUCATORS.

a. No learner will be denied admission or continued attendance on account of his/her HIV/AIDS status or perceived HIV/AIDS status. No educator will be denied the right to be appointed to a post, to teach or be promoted on account of his/her HIV/AIDS status or perceived status, nor for refusing to conclude or continue or renew a staff member's employment contract, nor to treat him/her in any unfair discriminatory manner.
b. No routine testing of learners or staff members for evidence of HIV/AIDS will be undertaken. No such testing will be undertaken as a prerequisite for admission or for continued attendance or to determine the HIV/AIDS incidence at the school. It will neither be done on any of the staff member

3] ATTENDANCE AT SCHOOL OF LEARNERS WITH HIV/AIDS.

a. The need of learners with HIV/AIDS with regard to their right to education will be accommodated as far as is reasonably practicable in the school.
b. 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. If and when learners with HIV/AIDS become incapacitated through illness, the school should make work available to them for study at home and should support continued learning where possible. Parents should, where practically possible, be allowed to educate their children at home in accordance with the policy for home education.
c. Learners who develop HIV/AIDS related behaviour problems cannot be accommodated due to the nature of our school. However, learners who develop neurological damage and intellectually impaired due to HIV/AIDS can be accommodated, provided they can cope with the academic demands of the school.
d. Learners with HIV/AIDS will not be placed only as an excuse to remove them from mainstream schools.

4] DISCLOSURE OF HIV/AIDS RELATED INFORMATION AND CONFIDENTIALITY.

a. No learner (or parent on behalf of a learner) or staff member is compelled to disclose his/her HIV/AIDS status to the school or employer.
b. According to the Health Act 1977, persons giving care to a person having a condition such as HIV/AIDS should be informed about the diagnosis by the medical practitioner. This implies that the school should be informed in the case of such a diagnosis being made.
c. Voluntary disclosure of a learner's / staff member's HIV/AIDS status to the appropriate authority will be welcomed and an enabling environment will be cultivated in which the confidentiality of such information is ensured and in which unfair discrimination is not tolerated.
d. A holistic programme for life skills and HIV/AIDS education should encourage disclosure. In the event of voluntary disclosure, it may be in the best interest of the learner with HIV/AIDS if staff members directly involved with the care of the learner is informed of his/her HIV/AIDS status. This information must be treated with complete confidentiality. A staff member may disclose his/her HIV/AIDS status to the principal of the school.

e. Any person to whom any information about the medical condition of a learner or staff member has been divulged must keep this information confidential.

f. Unauthorized disclosure of HIV/AIDS related information could give rise to legal liability. The principal cannot require an applicant for a job to undergo an HIV/AIDS test before he/she is considered for employment.

g. A staff member cannot be dismissed, retrenched or refused a job simply because he/she is HIV positive.

5] SAFE SCHOOL ENVIRONMENT

5.1 In situations of potential exposure to HIV, all persons are regarded as potentially infected and all blood will 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 (e.g. Tears, saliva, mucus, phlegm, urine, faeces and pus) must therefore be treated as potentially infectious.

a) Blood especially in large spills such as nosebleeds and dried bloodstains, 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 be cleaned immediately with running water and/or other antiseptics.

d) In case of a biting/scratching incident where the skin is broken the wound must be washed and cleansed under running water, dried, treated with antiseptic and covered with a waterproof dressing.

e) Blood splashes to the face (mucous membrane of eyes, nose or mouth) should be flushed with running water for at least three minutes.

f) Disposable bags/incinerators must be made available to dispose of sanitary wear.

5.2 All open wounds, sores, breaks in skin, grazes and open skin lesions should at all times be covered completely and securely with non-porous or waterproof dressing or plaster so that there is no risk of exposure to blood.

a) Cleansing and washing should always be done with running water and not in containers of water.

b) All persons attending to blood spills, open wounds breaks in skin, grazes and open skin lesions as well as body fluids and excretions, must wear protective latex gloves or plastic bags over their hands to eliminate the risk of HIV transmission effectively. The school must provide these gloves/bags.

c) If a surface is contaminated with body fluids and excretions which could be stained or contaminated with blood (e.g. Tears, saliva, mucus, phlegm, urine, faeces and pus) that surface should be cleaned with running water if possible and fresh household bleach or other antiseptic agents, paper/disposable cloths. The person doing the cleaning must wear protective gloves or plastic bags covering their hands. Blood-contaminated material should be sealed in a plastic bag and incinerated or sent to an appropriate disposal firm. Tissues and toilet paper can be flushed down the toilet. If instruments (e.g. scissors) become contaminated with blood or other body fluids, it should be washed and placed in a strong household bleach solution or other antiseptic for at least an hour before drying and re-using. Needles and syringes cannot be re-used and must be safely disposed off. Learners who are injured at school will be taken to the sickroom for attendance by the school sister.
Large wounds should be tightly covered with a clean cloth before being taken to the sickroom. Members of the safety committee, physiotherapists and the nursing sister are trained in first aid. First aid kits are available:

a. At the physiotherapists
b. In the office
c. In the woodwork center.
d. In the sickroom
e. Consumer studies center

5.3 Each kit should contain the following:

Each class should have at least two large and two medium pairs of disposable latex gloves available at all times. These can be obtained from the school sister.

b. Two large and two medium pairs of household rubber gloves for handling blood-soaked material in specific instances (e.g. when broken glass makes the use of latex gloves inappropriate).
c. Absorbent material, waterproof plasters, disinfectant, scissors, cotton wool, gauze tape, tissues, containers for water and a resuscitation mouthpiece or similar device with which mouth to mouth resuscitation could be applied without any contact being made with blood or other bodily fluids.
d. Protective eye wear
e. Protective facemask to cover nose and mouth.

Universal precautions are in essence barriers to prevent contact with blood or body fluids. Should the equipment not be available less sophisticated devices can be used. These may include:

a. Unbroken plastic bags on hands where rubber or latex gloves are not available.
b. Common household bleach for use as disinfectant, diluted one part bleach to ten parts of water (1:10) made up as needed.
c. Spectacles
d. A scarf

each classroom will be supplied with an emergency kit containing a pair of latex gloves, as well as paper towels, plasters and disinfectant.

Latex or rubber gloves will be available at every sports event from the person in charge of first aid.

First aid kits are available in the specified areas. Appropriate cleaning material is available from the school sister.

5.4 Used items should be dealt with as indicated in paragraphs 5.1.6 and 5.1.7.

The contents of the first aid kits on the buses once a term should be checked supplied by a designated staff member. Expired and depleted items should be replaced immediately.

Fully equipped first aid kit should accompany all learners on outings and events and be available on transport vehicles.

All learners, educators and staff members will be given appropriate information and training on HIV transmission, handling and using the first aid kits, the application of universal precautions and the importance of adherence to universal precautions.

5.5 Learners and staff members will be trained to manage their own bleeding or injuries and to assist and protect others.

5.6 Learners must be instructed never to touch blood, open wounds, sores, breaks in skin, grazes and open skin lesions of others, nor to handle emergencies such as nosebleeds, cuts and scratches of friends on their own, they must call for assistance of a staff member immediately.

Learners should be taught that all open wounds, sores, breaks in skin, grazes and open skin lesions on all persons must be kept covered completely with waterproof dressings or plasters at all times, not only when they occur in the school environment.
5.7 All learners, staff members and parents should be informed about the universal precautions that will be adhered to at the school.

6 PREVENTION OF HIV TRANSMISSION DURING PLAY AND SPORT.

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

6.2 The risk increases where open wounds, sores, breaks in skin, grazes and open skin lesions or mucous membranes of learners are exposed to infected blood.

6.3 Adequate wound management in the form of the application of universal precautions is essential to contain the risk of HIV transmission during contact play. No learner or staff member may participate in contact play or sport with an open wound, sores, breaks in skin, grazes and open skin lesions.

If bleeding occurs during contact play or sport the injured party should be removed from the playground / sports field immediately and treated appropriately as described in paragraphs 5.1 to 5.7 Only then may the player resume playing and only for as long as the injury remains completely and securely covered. Blood stained clothes must be changed.

6.5 The same precautions apply to injured staff members or spectators. A fully equipped first-aid kit will be available wherever contact play or sports takes place. Adherence to universal precautions should take place at all times. Sport participants, including coaches with HIV/AIDS, should seek medical counseling before participation in sport, in order to assess risks to their own health as well as the risk of HIV transmission to other participants. Staff members acting as coaches, sport administrators and managers have special opportunities for meaningful education with regards to HIV/AIDS. They should thus encourage medical and other counseling where appropriate.

7 EDUCATION ON HIV/AIDS

a. A continuing life-skills and HIV/AIDS Education programme is followed at The Gateway School in accordance with Christian principles as stated in the school policy.

b. Gender based education will be given where boys are taught by a male teacher and the girls will be taught by a female teacher.

c. Age-appropriate education on HIV/AIDS forms part of the curriculum for all learners and should be integrated in the life-skills education programme for all learners.

d. Providing information on HIV/AIDS and developing the life skills necessary for the prevention of HIV transmission.

e. Inculcating from an early age onwards, basic first aid principles, including how to deal with bleeding with the necessary safety precautions.

f. Emphasizing the role of drugs, sexual abuse and violence and sexually transmitted diseases (STD's) in the transmission of HIV and empowering learners to deal with these situations.

g. Encouraging learners to make use of health care, counseling and support services (including services related to reproductive health care and the prevention and treatment of sexually transmitted diseases) offered by community service organizations and other disciplines.

h. Teaching learners how to behave towards persons with HIV/AIDS, raising awareness on prejudice and stereotypes around HIV/AIDS.

7.1 Cultivating an enabling environment and a culture of non-discrimination towards persons with HIV/AIDS.

7.2 Providing information on appropriate prevention and avoidance measures, including abstinence from sexual intercourse with multiple partners and immorality. The proper use of condoms, faithfulness to one’s partner, obtaining prompt medical treatment for STD’s and tuberculosis, avoiding traumatic contact with blood and the application of universal precautions.

7.3 Education and information regarding HIV/AIDS must be given in an accurate and scientific manner and
In language and terms that are accessible to learners.

Register teachers will be responsible for life-skills HIV/ Aids Education in the as per 7 (b);

1] Pre- foundation
2] Foundation
3] Intermediate
4] Vocational senior

Parents of learners will be informed about life-skills and HIV/AIDS Education Program offered at The Gateway School, the learning content and methodology used, as well as values that will be imparted. Parents and guardians are encouraged to participate as sexuality educators and imparters of values at home.

7.4 Educators and staff members may not have sexual relations with learners.

a. Should this happen, the matter will be dealt with in terms of the Employment of Educators Act of 1998.

b. If learners, educators or staff members are infected with HIV/AIDS, they will be informed that they can still lead normal, healthy lives for many years by taking care of their health.

8. DUTIES AND RESPONSIBILITIES OF LEARNERS, EDUCATORS, STAFF MEMBERS AND PARENTS

All learners and staff members and parents should respect the rights of other learners, educators, staff members and parents.
The ultimate responsibility for the behaviour of a learner rests with his/her parents/caregivers.

8.1 Parents/caregivers of all learners:

a. are expected to require learners to observe all rules aimed at preventing behaviour, which may create a risk of HIV transmission and

b. 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 staffing governing body.

c. A learner and his/her parents or staff member with HIV/AIDS should consult medical opinion to assess whether he/she owing to his/her condition or conduct poses a medically recognized significant health risk to others. If such a risk is established the principal should be informed in order to take the necessary steps to ensure the health and safety of other learners and staff members.

d. Educators and staff members have a particular duty to ensure that the rights and dignity of all learners, educators and staff members are protected.

9. REFUSAL TO STUDY WITH OR TEACH A LEARNER WITH HIV/AIDS OR TO WORK WITH OR BE TAUGHT BY A STAFF MEMBER WITH HIV/AIDS.

9.1 Refusal to study with a learner or work with a staff member with or perceived to have HIV/AIDS will be pre-empted by providing accurate and understandable information on HIV/AIDS to all persons concerned.

9.2 Learners who refuse to study with a fellow learner or staff member refusing to work with a fellow staff member due to him of her having HIV/AIDS or perceived to have HIV/AIDS and who are concerned that they will be affected, will receive counseling.

9.3 The situation will be resolved by the principal and persons involved with the principles contained in this policy, the code of conduct for learners or the code of professional ethics for educators. Should the matter not be resolved through counseling and mediation, disciplinary steps may be taken.

10. SCHOOL IMPLEMENTATION PLANS
a. Latex gloves or plastic bags will be available on request from the school sister.
b. Due to the nature of The Gateway School, condoms will not be freely supplied to learners or staff members. Any staff member requiring condoms may obtain them from regional health offices or from the school sister. (As requested)
c. Life Skills HIV/AIDS education programme from Grade 1 to 9 is implemented

d. The HIV/AIDS policy of The Gateway School is available to all.

11. HEALTH ADVISORY COMMITTEE

This role is performed by The Gateway School Safety and Security Committee. Staff members requiring any additional information regarding HIV/AIDS transmission can contact their own physician or the school sister.

WE, THE UNDERSIGNED, HEREBY DECLARE THAT THIS POLICY DOCUMENT IS THE OFFICIAL POLICY ON HIV AIDS OF THE GATEWAY SCHOOL. THIS POLICY DOCUMENT REPLACES ALL PREVIOUS HIV AIDS POLICY DOCUMENTS BEFORE MARCH 2014

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Dr ME Kempen                Mr G Duvenhage
(PRINCIPAL)                 (CHAIRMAN)