



HIV & AIDS POLICY

JANUARY 2021

AMENDMENT SHEET

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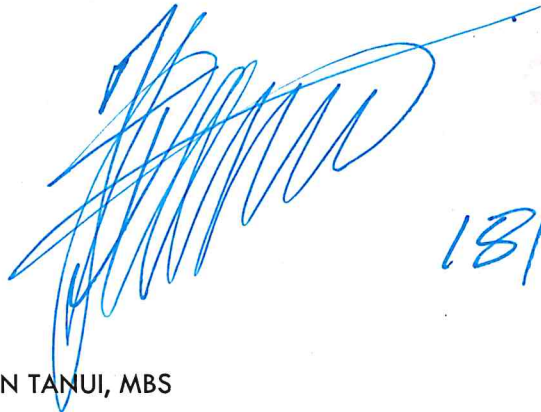
FOREWORD

KOTDA is a State Corporation established under Legal Notice No 23 Of 2012. The Authority has developed a number of work place policies to guide implementation of its mandate and operations. These policies are aligned to the Constitution of Kenya 2010, the Vision 2030, government regulations and guidelines provided by the Performance Contracting Management Unit, KOTDA's Strategic Plan and the country's international commitments among others

The purpose of this the Workplace Policy on HIV And Aids is therefore to serve as a point of reference in mainstreaming standard workplace principles and values to ensure fair, equitable and consistent decision-making process in the operations of KOTDA

The policy will be a handy reference to tackle the challenges brought into the occupational settings by the effects of HIV and AIDS and guide Human Resource managers in developing workplace programmes to facilitate effective and planned responses for the prevention and management of HIV and AIDS at the workplace

KOTDA strives to provide a conducive working environment in which both the employee's and stakeholder's interests are served.



18/06/2021

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ACKNOWLEDGEMENT

We wish to express our gratitude and sincere thanks to the CEO, Eng. John Tanui and the Board of Directors for providing the necessary resources to facilitate the development of this The Workplace Policy on HIV and Aids.

We also acknowledge the contribution of the Chairs of various Committees and their members, representatives of Lead Agencies for their invaluable guidance and all the KOTDA staff who made the development of this The Workplace Policy on HIV and Aids a success.

Your efforts and commitments are sincerely appreciated.

Chief Manager, Corporate Services

KoTDA



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ACRONYMS AND ABBREVIATIONS

ACU	Aids Control Unit
AIDS	Acquired Immune Deficiency Syndrome
CEO	Chief Executive Officer
CSOs	Civil Society Organizations
EMTCT	Elimination of Mother to Child Transmission of HIV
GIPA	Greater Involvement of People Living with HIV/AIDS
HAPC	HIV/AIDS Prevention and Control
HBTC	Home Based HIV Testing and Counselling
HIV	Human Immuno - Deficiency Virus
HR	Human Resources
HTS	HIV Testing Services
ICT	Information Communication and Technology
ILO	International Labour Organization
KAIS	Kenya AIDS Indicator Survey
KOTDA	Konza Technopolis Development Authority
MCDA_s	Ministries, Counties, Departments and Agencies
NACC	National AIDS Control Council
NASCOP	National Aids and STI Control Program
PC	Performance Contract
PEP	Post-Exposure Prophylaxis



PLWHA People Living with HIV/AIDS

STI Sexually Transmitted Infections



1 INTRODUCTION

Since the Kenyan Government adopted a multi-sectoral strategy to address HIV and AIDS and declared the pandemic a national disaster in 1999, substantial progress has been achieved. The number of new infections and the AIDS-related deaths have reduced. However, the pandemic continues to be a global health priority and constitutes one of the most formidable challenges to development and social progress. It continues to have an enormous impact in households, communities, businesses, public services and national economies. It is eroding decades of development gains, undermining economies, threatening security and destabilizing societies. Globally, the WHO estimates that nearly 36.7 million people in 2016 were living with HIV and an estimated 1.8 million people were newly infected with HIV in the same year.

After HIV and AIDS was declared a national disaster in 1999, the Government adopted a multi-sectoral approach to responding to HIV and AIDS in Kenya. The public sector, development partners, Civil Society Organizations (CSOs), Faith Based Organizations (FBOs) and the private sector put in place measures to respond to the epidemic. The country has steadily managed to bring down the prevalence rate from 14.7% in 1999, to 5.6% in 2012 for adults aged between 15 and 64 years (KAIS, 2012):

According to the findings from KOTDA's Situation Assessment on Knowledge of HIV and AIDS of 2016, above 90% KOTDA employees show high levels of knowledge on HIV and AIDS. Further, majority of the employees hold positive attitudes regarding HIV and AIDS. However, there is a small proportion of KOTDA employees who express negative attitudes towards People Living with HIV and AIDS (KOTDA, 2016).

The policy provides guidance for management of comprehensive integration of HIV/AIDS prevention interventions for employees in KOTDA and to those who deal with the day-to-day HIV/AIDS related issues and problems that arise within the workplace. It further outlines employees' rights, responsibilities and expected behaviour.

The policy covers key areas such as legal and regulatory framework, guiding principles, management of human resource HIV/AIDS programmes in the workplace and implementation.

2 POLICY STATEMENT

KOTDA recognizes the seriousness of the HIV and AIDS epidemic and its impact at the workplace and also supports national efforts to reduce new HIV infections, the spread of infection and minimize the impact of the disease.



3 RATIONALE

HIV and AIDS present an enormous challenge to the development of this country and has put immense pressure on Kenyan workplaces. The epidemic has led to loss of skilled and experienced workforce and low productivity as a result of HIV-related deaths, increased absenteeism, increased stress, HIV-related stigma and discrimination among others.

KOTDA has developed a policy framework for the prevention, treatment, care and support of the infected and affected employees. This policy demonstrates the Authority's concern and commitment in taking concrete steps in the prevention and management of HIV and AIDS. The Policy provides guidance for the management of employees in KOTDA on issues of HIV and AIDS in a consistent, coherent, harmonised and equitable approach.

4 POLICY SCOPE GOAL AND OBJECTIVES

4.1 SCOPE

This policy sets standards for managing HIV and AIDS for workplace Programmes and applies to all employees of the KoTDA.

4.2 Policy Goal

This policy provides a framework and sets standards for addressing HIV and AIDS in the KOTDA workplace.

4.3 Policy Objectives

The main objective of this policy is to provide a framework to address HIV and AIDS in the Authority Specifically, the policy aims at:

- a. Setting Minimum Internal Requirements (MIR) for managing HIV and AIDS in the Authority;
- b. Establishing and promoting programmes to ensure non-discrimination and no stigmatization of the infected;
- c. Contributing to national efforts to minimize the spread and mitigate against the impact of HIV and AIDS;
- d. Guiding human resource managers and employees on their rights and obligations regarding HIV and AIDS.
- e. Guide the management and employees on workplace rights and obligations



regarding HIV and AIDS.

- f. Create a conducive environment, establish structures, rights-based approaches and minimum internal requirements for responding to HIV and AIDS in KOTDA.
- g. Ensuring adequate allocation of resources to HIV and AIDS interventions;

5 LEGAL AND REGULATORY FRAMEWORK

Kenya has several legal statutes which support HIV and AIDS interventions at the workplace. While not all are specific to HIV and AIDS, their interpretation and application create an enabling legal and regulatory environment for the desired impact on HIV and AIDS.

This policy is in compliance with the Constitution of Kenya, HIV and AIDS Prevention and Control Act (2006) and other national laws and regulations, as well as with the Recommendation concerning HIV and AIDS and the World of Work, 2010 (No. 200), HLM Political Declaration (2011) and the ILO Discrimination (Employment and Occupation) Convention, 1958 (No. 111). The legal and regulatory frameworks within which this Policy will be implemented include but not limited to the following:

5.1 The Constitution of Kenya

The Constitution of the Republic of Kenya is the supreme law of Kenya and lays the foundation for all other national laws. It addresses matters relating to equality, freedom from discrimination and universal access to services as below:

- i. Chapter 4 on the Bill of Rights, Article 27 provides for equality before the law, right to equal protection and equal benefit. The state shall not discriminate directly or indirectly against any person on any grounds, including race, sex, pregnancy, marital status, health status, ethnic or social origin, colour, age, disability, religion, conscience, belief, culture, dress, language or birth.
- ii. Article 31 and 43 on the right to privacy, confidentiality and the right to the highest attainable standard of health which includes the right to health care services.
- iii. Article 6 (3) provides for national state organs to ensure reasonable access to its services in all parts of the Republic. This implies that all public servants working at National Government and County Governments workplaces need to have access to HIV related services.
- iv. Fourth Schedule, Article 185(2), 186(1) and 187(2) on distribution of functions between the National Government and County Governments.



5.2 The Counsellors and Psychologists Act 2014

The Counsellors and Psychologists Act 2014 outlines the qualifications of a professional counsellor and regulates the counselling practice in line with set standards and code of ethics. Under this provision, counsellors providing counselling services to HIV and AIDS clients must meet the set standards.

5.3 Public Service Commission Regulations 2005

The Public Service Commission Regulations 2005 prohibits discrimination in appointment, promotion and transfer of public servants. The regulations provide for the following:

- i. The appointment, promotion and transfer of a public officer shall take into account only the merit, ability, seniority, experience and official qualifications of the candidate,
- ii. If a public officer is incapable by reason of any infirmity of mind or body of discharging the functions of his public office, he/she may present himself/herself before a Medical Board with a view to it being ascertained whether or not he/she is incapable as aforesaid.
- iii. Any employee who is ill should seek and obtain permission as per existing regulations for absence from the workplace on account of ill health.

These provisions imply that no employee should be discriminated against on the basis of his/her actual or perceived HIV status.

5.4 HIV and AIDS Prevention and Control Act (2006)

The HIV and AIDS Prevention and Control (HAPC) Act makes specific reference to HIV and AIDS in relation to provision of education and information at the workplace, discrimination, privacy, confidentiality and human rights. Specifically, the Act provides that: -

- i. Under Sections 4 and 7, the Government shall promote public awareness about the causes, means of transmission, consequences and means of prevention and control of HIV and AIDS through a comprehensive nationwide educational and information campaign at all places of work and ensures the provision of basic information and instructions on HIV prevention and control to all public employees. Section 7 further notes that such information to be provided, shall cover issues of confidentiality at the workplace and attitudes towards infected employees;
- ii. Under Section 13, no person shall compel another to undergo an HIV test save where a person is charged with an offence of a sexual nature under the Sexual Offences



Act (2006);

- iii. Section 22 prohibits the disclosure of an HIV test result or any related assessment result of another person without his/her written consent; In
- iv. In Part VIII, the Act makes it an offence for any person to be discriminated against on the grounds of actual, perceived or suspected HIV status, in relation to employment, access to education, credit, insurance, healthcare, travel, habitation or seeking public office; and
- v. Section 25 makes provision for establishment and functioning of the HIV Tribunal with jurisdiction to examine cases of HIV-related discrimination thereby implementing the fundamental rights of persons living with or affected by HIV.

5.5 Sexual Offences Act No. 3 of 2006

The Sexual Offences Act No. 3 of 2006 addresses issues of sexual offences, their definition, prevention and protection of all persons from harm from unlawful sexual acts. The relevant sections expressly relate to this policy are 3, 4, 23-26.

5.6 Persons with Disability Act 2003

Disability Act makes provisions for non-discrimination and non-stigmatization in respect to access to services and opportunities.

5.7 National Labour Laws and Regulations

These are in conformity with the International Labour Standards, ILO Discrimination (Employment and Occupation) Convention, 1958 (No. 111), HIV and AIDS Recommendation, 2010 (No. 200) and other ILO Conventions to which Kenya is a signatory. These are as follows:

5.7.1 The Employment Act 2007

The Employment Act (2007) declares and defines the fundamental rights of employees and the basic conditions of employment. It addresses issues on discrimination (Part II Section 5) and sexual harassment (Part II Section 6)

It sets out the minimum standards applicable for conditions of employment, relating to wages, leave, health and contracts of service including termination of the contract. Under this Act, no employer shall discriminate directly or indirectly against an employee on grounds of race, colour, sex, language, religion, political or other opinion, nationality, ethnic or social origin, disability, pregnancy, mental status or HIV status. The employer shall provide proper healthcare for employees during serious illness. The employer can



only discharge this function if the employee notifies the employer of the illness.

The Act implies that there shall be no discrimination on the grounds of HIV status, and states in Section 46 (g) that HIV and AIDS does not constitute a fair reason for dismissal or for imposition of disciplinary penalty on an employee.

5.7.2 The Labour Relations Act No. 14 of 2007

The Act protects the employee and prospective employee from discrimination based on their real or perceived HIV status (Part II Section 5a) ensuring equal rights to opportunities for the infected and affected in training, employment, promotions and other employment benefits.

5.7.3 The Labour Institutions Act, No.12 of 2007

The Act provides for workplace interventions by appropriating the responsibility of providing these services on the employer while the employee is charged with the responsibility of accessing them (Part V Section 37a).

5.7.4 Work Injury Benefits Act, No. 13 of 2007

Part VII of the Act, section 45 (1) provides for workplace equipments and service for first aid to employees in case of accidents. In Section 38 (i), it provides for compensation to employees for work related injuries and diseases contracted in the course of their employment.

The interpretation of this section provides for post-exposure prophylaxis (PEP) to those who, in line of duty, accidentally come into contact with potentially infectious HIV contaminated material and also sets grounds for reasonable compensation for those who get infected in this way. In addition, risk and extrenous allowances shall also be paid to officers in line with existing Government regulations.

All employees shall be trained on safety steps to be taken following an accident in order to avoid unnecessary claims resulting from carelessness. All officers shall ensure safety to themselves and others when performing their duties or when attending to their colleagues who have injured themselves during and after an accident.



5.7.5 Occupational Safety and Health Act No 15 of 2007

The Act provides for the safety, health and welfare of employees and all persons lawfully present at workplaces and for matters connected therewith. It charges the employers with ensuring a safe and healthy work environment by ensuring all health risks and their associated hazards are closely monitored and managed.

Section 16 (1) prohibits persons from engaging in any improper activity or behaviour at the workplace, which might create or constitute a hazard to that person or any other person. The implication of this Act, with regards to HIV, is that the employer must ensure the safety of the workplace so that employees are not at risk of infection at the workplace. This is in recognition that HIV is a workplace occupational hazard.

6 GUIDING PRINCIPLES

The Policy's Guiding Principles are in accordance with the Constitution of Kenya, HIV and AIDS Prevention and Control Act (2006), provisions of the National AIDS Control Council (NACC), Public-Sector Workplace Policy for HIV & AIDS (Revised Edition 2017), World of Work, 2010 (No. 200), HLM Political Declaration (2011) and the ILO Discrimination (Employment and Occupation) Convention, 1958 (No. 111). The following Guiding Principles will form the basis for specific provisions in this Policy:

6.1 Recognition of HIV and AIDS as a Workplace Issue

KOTDA recognizes that HIV and AIDS is a workplace issue and should be treated like any other condition or illness that may affect employees. KOTDA shall integrate HIV and AIDS into its core functions and put into place measures and strategies to manage HIV and AIDS.

6.2 Non-Discrimination/Stigmatization

There shall be no stigmatisation and/or discrimination of employees infected or affected by HIV/AIDS, including recruitment, promotions, training, recognition etc. on the basis of real or perceived HIV status.

6.3 Gender Responsiveness

HIV and AIDS affects and impacts on women and men, boys and girls differently due to their biological, social, cultural and economic circumstances. Application of this policy shall be responsive to their different and specific needs through gender sensitive, responsive and transformative HIV programmes targeting men, women boys and girls including promotion of



equal gender relations and generation of gender disaggregated data. Measures shall be taken in or through the workplace to reduce the transmission of HIV and alleviate its impact by:

- a. Ensuring gender equality and the empowerment of women; and
- b. Ensuring actions to prevent and prohibit sexual harassment, abuse, exploitation and violence in the workplace.

Involvement in these vices shall be treated as gross misconduct and where proven, shall lead to disciplinary action as stipulated in KoTDA HR Policy, existing laws and Public Service regulations.

6.4 Safe and Healthy Work Environment

A safe and healthy working environment is critical for optimal health, wellbeing and productivity. Management will have the responsibility of minimising the risk of HIV transmission and exposure of PLHIV by adopting appropriate Universal Infection Standard Precautions at the Authority's workplace where appropriate.

6.5 Social Dialogue

Consultation brings about concurrence and is critical for successful implementation of workplace HIV programmes. Implementation of HIV and AIDS programmes requires the building of trust, co-operation, willingness and a common purpose between the management and employees. This is cultivated through communication, open discussions and dialogue. Efforts shall be made to promote dialogue, consultations and negotiations on wellness and HIV related matters.

6.6 HIV Testing or Screening and Fair Labour Practices

HIV testing or screening is not required for recruitment, appointment, continuation of employment or promotion and no employee shall be compelled to undergo an HIV test for any of the above. However, the Authority will promote and facilitate access to voluntary confidential HIV testing for all employees in line with the HIV and AIDS Prevention and Control Act 2006.

Every person has the right to fair labour practices in terms of recruitment, appointment and continued enjoyment of employment, promotion, training and any other workplace benefits. Real or perceived HIV status should not be a cause for termination of employment. All employees with HIV-related illness should be allowed to work for as long as they are fit to work, with reasonable accommodation if needed, to enable them to carry out the tasks of their job.

When an individual's condition progresses and he/she becomes unable to perform their current job, alternative work arrangements shall be considered to allow them to remain in employment for as long as possible. The employee with HIV should be encouraged to consider voluntary



retirement for the employee's own benefit and the management shall observe all the procedural safeguards required in the circumstances in line with the KoTDA HR Policy and the prevailing Public Service Regulations.

6.7 Confidentiality

Access to personal data relating to an employee's HIV status shall be bound by the rules of confidentiality consistent with existing laws.

6.8 Prevention of New HIV Infections

HIV infection is preventable through creation of comprehensive HIV and AIDS knowledge, behaviour change, treatment and creation of a stigma-free and non-discriminatory environment. KOTDA shall put in place vibrant HIV prevention programmes targeting staff, their immediate family members and clients in line with the guidelines issued by NACC.

6.9 Treatment, Care and Support for Employees Living with HIV

HIV prevention without treatment, care and support for the employees living with HIV is only partially effective. Positive dignity and health programmes and HIV treatment is a more holistic and effective approach. KOTDA shall facilitate employees' access to affordable treatment, care and support services and related employees' assistance programmes through medical insurance, referrals and other viable options.

Measures to redeploy employees with HIV-related illnesses to work reasonably adapted to their abilities, to find other work through training or to facilitate their return to work shall be encouraged, taking into consideration the relevant national and international labour instruments.

6.10 Forging Strategic Partnerships

Strategic partnerships, networking and collaboration with the relevant service providers will be initiated and sustained for effective HIV and AIDS programming and service delivery.

6.11 Meaningful involvement of People Living with HIV and AIDS (MIPA)

The involvement of people living with HIV in decision making, formulation and implementation of HIV and AIDS policies and programmes shall be promoted at all levels of the Authority and in line with GIPA principles as spelt out in GIPA Guidelines. KOTDA shall implement positive health and dignity programmes and forge strategic partnerships with networks and communities of PLHIV in the implementation of this Policy.



6.12 Workplace Ethics

There will be zero tolerance to sexual harassment, abuse and exploitation

7 OPERATIONAL GUIDELINES

7.1 Management of Human Resource

Human resources are the most important factor of production in any organisation. The success or failure of an organisation depends largely on its human resources and therefore, there is always a need to examine the issues that affect it such as HIV and AIDS. The public service has an obligation to address the issues posed by HIV and AIDS on work force both at organisational and individual levels. This part of the policy addresses the human resource management aspects as follows:

7.2 Recruitment and Promotion

Real or perceived HIV status shall not be used as a basis for discrimination preventing the recruitment, appointment, deployment, promotion, continued employment or pursuit of equal opportunities in KOTDA.

7.3 Sick Leave

Sick leave will be provided for as stipulated in the KoTDA HR Policy and relevant Public Service regulations. However, additional sick leave days may be considered for employees living with HIV as part of reasonable accommodation.

7.4 Working Hours

Official working hours will continue to apply for all employees, as stipulated in the relevant service regulations. However, a reasonable accommodation in the form of flexible working hours for employees infected or affected by HIV may be applied based on voluntary confidential disclosure. The employees' voluntary disclosure of HIV status will be kept strictly confidential.

7.5 Counselling Services

The Government has recognised psychological challenges facing the public-sector workforce, introduced counselling services and developed a Public Service Guidance and Counselling Policy to regulate the delivery of the services to public servants. The Authority will ensure that these services are provided at the workplace as stipulated in the relevant service regulations.

7.6 Medical Benefits

The Authority has established a comprehensive Medical Insurance Cover to provide medical



benefits for its staff, their spouses and dependant children. The normal provision of medical benefits will continue to apply to KOTDA employees. Employees living with HIV like any other shall enjoy the benefits of comprehensive medical insurance.

7.7 Deployment and Transfers

The existing service regulations will continue to apply regarding deployment and transfers of KOTDA employees. However, the Authority shall ensure that:

- a. As much as possible, spouses are not separated to minimise vulnerability;
- b. Where employees are deployed in remote areas, the period served in such areas is limited to three years. Employees in these areas will also be allowed to make visits to their families in line with the KoTDA HR Policy and Public Service Regulations governing Leaves;
- c. Staff requiring access to family support or medical care are deployed appropriately; and;
- d. Where fitness to work is impaired by illness, reasonable alternative working arrangements are made.

7.8 Work Performance, Reasonable Accommodation and Relief Services

The management shall take measures to reasonably accommodate employees infected and affected with HIV. Where an employee is temporarily unable to perform their current jobs due to ill health or caregiving responsibility for an immediate family member, relief services, alternative work arrangements, time off for medical appointments, flexible working hours and extended sick leaves will be provided as may be appropriate. This is intended to allow the PLHIV to work for as long as possible.

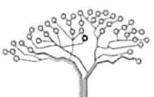
7.9 Housing and Accommodation

All public officers are eligible for house allowance applicable to their grades as stipulated in service regulations and in Government Circulars issued from time to time. All KOTDA employees will be eligible to benefit from the Government mortgage scheme regardless of their HIV status.

7.10 Training and Development

The Government policy on training shall apply to all employees of KOTDA. In addition, the Authority will:

- a. Educate and sensitise all employees on HIV and AIDS related issues;



- b. Monitor and evaluate human resource dynamics so that there is adequate supply of appropriate skills and competencies to meet service delivery needs;
- c. Mainstream HIV and AIDS in all training programmes curricula and undertake regular reviews to respond to the dynamics of HIV and AIDS; and
- d. Ensure HIV and AIDS-related training is integrated in institutional training plans and projections.

7.11 Sexual Harassment, Abuse and Exploitation

There shall be zero tolerance to sexual harassment, abuse and exploitation in the workplace. Involvement in these vices shall be treated as gross misconduct and where proven, shall lead to disciplinary action.

It is the moral responsibility of infected employees to take care of themselves and others to avoid re-infection and infecting others

7.12 Occupational Safety and Health

The Authority shall take measures to ensure that occupational health and safety workplace mechanisms are provided for in accordance with relevant standards. The relevant officer shall maintain healthy and safe working environments for KOTDA employees. All employees shall be trained on safety steps to be taken following an accident and all officers shall ensure safety to themselves and others when performing their duties or when attending to their colleagues who have injured themselves. All employees should ensure that they are safe from new HIV infections that may result from coming into contact with infected body fluids.

Workplace occupational health and safety measures that minimize the risk of contracting HIV include universal infection control precautions, proper and consistent use of personal protective and first-aid equipment, accident and hazard prevention measures, work practice controls, environmental control measures and other safety measures. However, the presence of a person living with HIV at the KOTDA workplace should not be considered a workplace hazard.

7.13 Retirement on Medical Grounds

The KoTDA HR regulations on retirement on medical grounds shall continue to apply and where an employee is medically unfit to continue working, the Authority will hasten the process of retirement for the benefit of the employee and with due regard to the relevant service regulations.



7.14 Terminal Benefits

The KoTDA HR regulations on payment of terminal benefits shall continue to apply. The Authority will facilitate speedy processing of terminal benefits and both the employers and employees shall ensure the next of kin records are updated regularly.

7.15 Testing, Confidentiality and Disclosure

The Government rejects HIV testing as a prerequisite for recruitment, access to training and promotion. However, KOTDA will promote and facilitate access to voluntary confidential HIV testing for all employees. All HIV Counseling and Testing (HTC) programmes shall be in line with the HIV and AIDS Prevention Act 2006.

HIV and AIDS is a complex and sensitive issue and disclosure of HIV status shall be on a voluntary basis. Such disclosure of HIV status shall be handled in a discreet, private and confidential manner and in line with the prevailing legislation. However, employees will be encouraged to be open about their HIV status and the Authority shall endeavour to create a work environment in which employees will feel safe to disclose their HIV status.

The Authority shall not take responsibility for personal disclosure to other members of the public and employees shall not draw unnecessary inferences on perceived or suspected HIV status of colleagues.

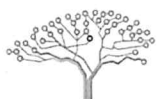
7.16 Stigma, Discrimination and Rights

The Government understands that stigma and discrimination undermines employees' welfare, safe healthy work environment and HIV prevention efforts, which depend on openness, trust and respect for basic rights. Employees living with HIV shall be protected against stigma, discrimination, victimisation or harassment.

It is an offence for any person to discriminate against another on the basis of actual, perceived or suspected HIV status. Employees shall not refuse to work or interact with fellow colleagues on basis of their actual, perceived or suspected HIV status and such refusal shall constitute to misconduct. Service regulations on disciplinary and grievance procedures shall apply equally to all employees except for where reasonable accommodation is required.

7.17 Concerns and Recourse

The CEO shall establish and maintain communication channels and fora for employees to raise grievances and concerns. Accessible mechanisms for dispute resolution shall be put in place for redress where employees' rights as provided for in this policy, have been violated. Disciplinary



action will be taken against any employee who violates the provisions of this policy. Employees shall be sensitised on functions of the Complaints Handling Committee and encouraged to report cases of stigma and discrimination to the Tribunal.

8 PROPOSED INTERVENTIONS FOR PREVENTION OF HIV AND AIDS

This section is aligned to the Maisha Performance Contract Guidelines for MCDAs and Maisha Certification System. The proposed interventions for workplace HIV and AIDS interventions include:

- a. Adoption and implementation of this workplace policy on HIV and AIDS;
- b. Promotion of male and female condom promotion, distribution and training on use and disposal;
- c. Creation of comprehensive HIV and AIDS knowledge among employees, their immediate family members and clients including peer education. This will include education and training on the modes of HIV transmission, the use of condoms and on the importance of confidentiality and maintaining a stigma and discrimination free workplace to support a culture of HIV prevention.
- d. Conduct a baseline survey on staff knowledge level on HIV and AIDS and implement the survey recommendations;
- e. Facilitation of employees, their immediate family members and clients to access HIV Testing Counselling services;
- f. Sensitisation of staff and clients to reduce stigma and discrimination towards PLHIV;
- g. HIV treatment literacy and promotion of positive health and dignity at the workplace;
- h. Putting in place non-discriminatory workplace benefits such as comprehensive medical insurance /or NHIF cover for all employees;
- i. Referrals for facility-based HIV services such as post exposure prophylaxis, voluntary medical male circumcision, antiretroviral therapy, prevention of mother to child transmission of HIV and HIV counselling and testing;
- j. Linkages for employees' wellness and psycho-social assistance for HIV and AIDS, GBV, post-traumatic stress disorders, alcohol, drugs and substance abuse, nutrition, physical exercise and other addictive behaviours including glucose, cholesterol, blood pressure and BMI checks.
- k. Putting in place non-discriminatory mechanisms on gender equality, empowerment of women and prohibition of gender-based violence at the workplace.
- l. Utilisation of corporate mandates to influence HIV and AIDS policies and programmes.



- m. Strengthening institutional health facilities, where available to provide comprehensive HIV services through integration of related services.

9 MINIMUM INTERNAL REQUIREMENTS

The implementation of the HIV and AIDS prevention interventions in 6.2 above is anchored on the following Minimum Internal Requirements (MIR) outlined below to be put in place by all KOTDA:

- a. Provision of employees' education and training on modes of transmission and measures to prevent exposure and infection including personal protective equipment where required;
- b. HIV/ AIDS Control Committee constituted and operationalized with at least 5 members and with 40% membership drawn from senior and middle level management;
- c. Establish/ reconstitute and operationalize HIV and AIDS Committee with 40% of the membership drawn from the senior and middle levels;
- d. Annual work plans for the implementation of HIV and AIDS interventions in 6.2 above targeting staff, their immediate family members and clients developed and submitted to NACC at the beginning of each Financial Year.
- e. Allocate a budget for the HIV activities targeting staff, their family members and clients;
- f. Collect and disseminate routine information on absenteeism, morbidity and mortality for purposes of Human Resource Planning; and
- g. Submit quarterly reports to NACC using the Maisha I and II manual or online reporting tools.

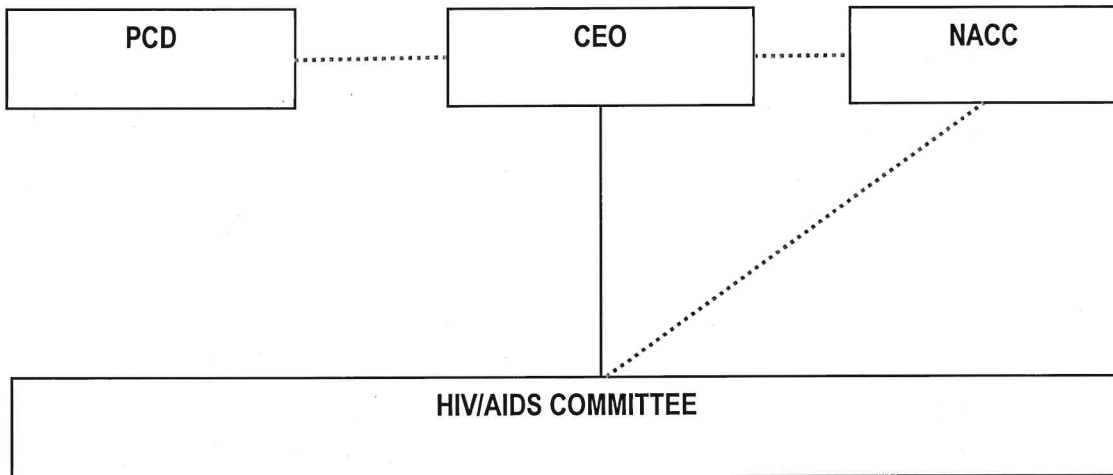
10 Implementation Framework

Provision shall be made for the participation of employees in designing, implementing, monitoring and evaluating the policy. This inclusion will ensure that the employees' needs and concerns are fully addressed in order to help create a culture of prevention at the work place.

The CEO will be responsible and accountable for the implementation of this policy. The following institutional framework, functions, roles and responsibilities will support the implementation of this policy:



10.1 Institutional Framework



10.2 Functions, Roles and Responsibilities

The institutions and officers responsible for implementing this policy are CEO, Heads of Departments, HIV/ AIDS Committee and staff. Successful implementation of this Policy highly depends on high level support and strict adherence to the functions, roles and responsibilities below:

10.2.1 The Chief Executive Officer

The CEO shall:

- a. Provide high level leadership and support for the implementation of this policy;
- b. Provide budgetary allocations and put in place structures to facilitate the implementation of this policy;
- c. Facilitate the adoption, implementation and review of this policy;
- d. Take immediate and appropriate corrective action when provisions of this policy are violated.

10.2.2 Managers and Unit Heads

The managers and unit heads shall be responsible for and committed to responding to HIV and AIDS issues at the workplace. Further to this, they shall:

- a. Support the implementation of this policy including integration of its implementation in their relevant departmental activities.
- b. Show leadership as part of the national campaign to address HIV and AIDS;



- c. Be educated and informed about HIV and AIDS and continuously support the dissemination of information about HIV and AIDS to all employees;
- d. Mainstream HIV and AIDS workplace issues in the respective annual work plans and other operational documents;
- e. Allocate adequate resources for HIV and AIDS activities and programmes at the KOTDA workplace;
- f. Facilitate the development of the appropriate capacities to respond to HIV issues at the workplace.

10.2.3 KOTDA HIV/AIDS Prevention Committee

The HIV/AIDS Prevention Committee shall:

- a. Coordinate the implementation of this policy in the Authority;
- b. Ensure that this policy on HIV and AIDS is domesticated, reviewed and implemented;
- c. Monitor and evaluate the implementation of this policy.
- d. Prepare annual work plans and quarterly reports on the implementation of this policy to the CEO for onward submission to NACC as stipulated in the Performance Contract Guidelines.

10.2.4 KOTDA Employees

All employees will be sensitised continuously on HIV and AIDS to protect themselves, their families and others from HIV infections and impact of HIV and AIDS. It is an obligation to all employees to comply with this policy. In addition, all employees are required to:

- a. Actively participate and support all workplace HIV and AIDS activities,
- b. Know their HIV status and act responsibly;
- c. Maintain their preferred level of disclosure when HIV positive; and
- d. Consider voluntary confidential disclosure of his or her HIV status in the context of a request for a workplace reasonable accommodation;
- e. Report to HIV Tribunal any matter considered to be unfair treatment based on ones' HIV status as described in this policy.

10.2.5 National Aids Control Council

The NACC was established under a Legal Notice No. 170 of September, 1999 to co-ordinate the multi-sectoral response to the HIV and AIDS epidemic in Kenya. In respect to this Policy, the



NACC is responsible for:

- a. Effective strategic direction and policy leadership for the response;
- b. Provision of technical support and enhanced capacities for the implementation of this policy;
- c. Evaluate and certify MCDAs in line with Maisha Certification Guidelines for the public sector;
- d. Receive annual work plans, quarterly reports from MCDAs and provide timely feedback.

11 MONITORING, EVALUATION AND RESEARCH

KoTDA shall established an HIV/AIDS committee to coordinate and implement the HIV/AIDS policy and programme. The committee shall consist of employees representing all departments of the Authority. The committee/ responsible officer will report regularly to the CEO.

12 POLICY REVIEW AND DEVELOPMENT

The policy document shall be subject to review every three years in order to keep in pace with the changing trends in the organization's environment and any other changes required as directed by the government. However, it can also be reviewed as need may arise or at such intervals as the Board and Management may determine.

13 EFFECTIVE DATE

This policy comes into effect from January 2021.

