FOIA Number: 2018-0756-F

FOIA MARKER

This is not a textual record. This is used as an administrative marker by the William J. Clinton Presidential Library Staff.

Collection/Record Group: Clinton Presidential Records

Subgroup/Office of Origin: National AIDS Policy Office

Series/Staff Member: Kristine Gebbie

Subseries:

OA/ID Number: 3771

FolderID:

Folder Title:
Chicago and Chamber of Commerce Conference 9/13-14/93

Stack:	Row:	Section:	Shelf:	Position:
S	66	5	4	3

Withdrawal/Redaction Sheet
Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. resume	[Personally Identifiable Information] [Partial] (1 page)	00/00/0000	b(6)

COLLECTION:
Clinton Presidential Records
National AIDS Policy Office
Kristine Gebbie
OA/Box Number: 3771

FOLDER TITLE:
Chicago and Chamber of Commerce Conference, 9/13-14/1993

2018-0756-F
jp4829

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

P1 National Security Classified Information [(a)(1) of the PRA]
P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
P3 Release would violate a Federal statute [(a)(3) of the PRA]
P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [a)(5) of the PRA]
P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.
PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).
RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

b(1) National security classified information [(b)(1) of the FOIA]
b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

SCHEDULED SPEECH

FOR

KRISTINE M. GEBBIE
NATIONAL AIDS POLICY COORDINATOR

DATE OF SPEECH:	Tuesday, September 14, 1993
TIME:	12 noon to 3:00 p.m.
LOCATION:	Hyatt Regency Chicago, 151 East Wacker Drive
ONAPC CONTACT:	John Paul Gurrola
SITE CONTACT:	Beth Strode 312/565-1234
REMARKS REQUIRED:	You are the main speaker at this event. Your speech is expected to last approximately 20 - 30 minutes. You actually speak at 12:45 p.m. Beth has suggested that you discuss the following topics: Health Care Reform in relation to AIDS, your policies being established, AIDS in the work place related items, and the Business Responds To AIDS program.
MEDIA COVERAGE:	About 100 reporters are invited to the event. Most are health and business reporters. Beth is expecting about 20 local affiliate reporters to attend. Any one-on-one media requests will be made after the event. Beth will help facilitate these requests.
PARTICIPANTS:	There will be about 100 people in the audience. Most will be comprised of Chicago-land Chamber of Commerce members, staffers and reporters. Also speaking with you is Hank Provost, Director of Employee Relations, Motorola, Inc.; Fred Kroger, Director, National AIDS Information and Education Program in Atlanta, and Peter Petesch, Vice President of Galland, Kharasch, Morris, and Garfinkle, P.C. here in Washington.
BACKGROUND:	Beth Strode of Ogilvy, Adams and Rinehart is handling press relations for the event. She has been contracted by CDC. Judith Johns, Deputy Commissioner of Chicago's Health Department will introduce you.

MEMO

To: Warren Buckingham

From: Freda Bernstein

Date: September 10, 1993

Subj: Talking points on AIDS in the Workplace

Attached please find talking points on AIDS in the workplace issues and the CDC Business Responds to AIDS Program for Kristine Gebbie. A fact sheet providing related statistics is also included. Fred Kroger has a set of slides illustrating how a partnership works and who "should have a place at the table." If Ms. Gebbie would like to view and perhaps use any, Fred would be happy to help her.

TALKING POINTS FOR KRISTINE GEBBIE
Chicago
September 14, 1993

I. Conceptual Framework for CDC Business Responds to AIDS Program

- HIV prevention efforts will be most effective in areas/communities where the public and private sectors work together in partnership

- Most HIV positive persons are 25-44 - the core of our workforce

- Business and labor are key private sector partners - they encompass the spectrum of all Americans - all ages, races, and sexes in a wide range of occupations

- Focus on the workplace is essential, therefore, if we are going to halt the spread of AIDS.

- The partnership of the Chicagoland Chamber of Commerce and CDC's Business Responds to AIDS Program is a call to action. The program encourages the development of similar partnerships throughout the country.

- Although the CDC Business Responds to AIDS Program is coordinated by the Centers for Disease Control and Prevention, it represents partnerships nationwide - with business and labor, the American Red Cross, the National Leadership Coalition on AIDS, state and local health departments, the AFL-CIO, and community-based organizations.

II. Examples of Ways in which the CDC Business Responds to AIDS Program Has Assisted Businesses in Developing AIDS in the Workplace Programs

Example of Large Business

A grocery store chain in the south Atlantic states was seeking information on developing a comprehensive workplace program. They called the National Leadership Coalition on AIDS, and in turn, were referred to the CDC Business Responds to AIDS (BRTA) Resource Service at the Clearinghouse. BRTA Resource Service staff provided the following information and referrals:

- Information on the development of a comprehensive workplace education program
- The BRTA Managers Kit and other HIV/AIDS educational materials
- Referrals to appropriate referral network members to provide additional assistance to the company
    - The Equal Employment Opportunity Commission (Americans With Disabilities Act information)
    - The National Leadership Coalition on AIDS (policy development)
    - The American Red Cross (employee education)
    - the AFL-CIO (steward/worker training)
    - the Food Marketing Institute (materials)
    - the National Association For People With AIDS (Speakers Bureau)
- Referrals to local AIDS Service organizations for community involvement and family education

Impact: Referrals and materials supplied by the Resource Service assisted in the development of a comprehensive AIDS in the workplace program for over 25,000 employees in five states.*

* For purposes of confidentiality, the grocery store chain is not identified by name.

Example of Small Business

A hair salon in Washington, DC, needed information to educate staff in different salons in the DC Metropolitan area. A worker had previously been diagnosed with AIDS, but no disclosure had been made to staff or clients. BRTA Resource Service staff provided the following referrals and information

- The BRTA Manager's Kit and HIV/AIDS educational materials

- Referral to the American Red Cross (employee education)

- Referral to the National Association of People With AIDS (Speakers Bureau)

- Referrals to local AIDS service organizations

Impact: Referrals and materials provided by the BRTA Resource Service assisted in the education and training of 50 workers in seven locations across the DC metropolitan area. An AIDS in the workplace policy was also developed and hair salons collected monies for local AIDS service organization*.

* For purposes of confidentiality, the hair salon is not identified by name.

Example of Association

The **Association of Flight Attendants**, Washington, DC, called the CDC Business Responds to AIDS Resource Service for information on developing a workplace program. Resource Service staff provided the following information and referrals:

- Information on policy development, worker education, training for management.

- Referral to the American Red Cross (employee education)

- Referral to the National Leadership Coalition on AIDS (policy development)

- Referral to AFL-CIO (steward and worker training)

Impact: An education program for over 33,000 members on 19 carriers was coordinated between the American Red Cross and the AFL-CIO. The National Leadership Coalition on AIDS assisted in policy development. The entire process led to the development of other health education programs based on the HIV/AIDS model.

AIDS IN THE WORKPLACE
FACT SHEET *continued*

- As with any catastrophic illness, AIDS can affect an employer in many ways:
  - Insurance and health care costs
  - Productivity
  - Work disruption
  - Customer concerns
  - Employee morale
  - Legal considerations
  - Confidentiality and privacy
  - Discrimination concerns
  - Disability requirements
  - Job accommodation

The Centers for Disease Control and Prevention's (CDC) Business Responds to AIDS (BRTA) Program is designed to help businesses across the country develop and implement comprehensive workplace-based HIV and AIDS prevention education programs for employees, their families, and the community. The goals of this program are to prevent the spread of HIV, promote education, prevent discrimination, and foster community service and volunteerism both in the workplace and in the community. In order to achieve these goals, BRTA has developed materials and technical assistance to assist businesses in forming an HIV and AIDS program.

CDC

AIDS IN THE WORKPLACE FACT SHEET

HIV and AIDS affect every segment of society: the home, the school, the religious institution, and the workplace. It is estimated that a minimum of 40 million people worldwide will be infected with HIV by the year 2000. The potential worldwide economic impact of such projections could equal 1.4% of the world gross domestic product annually.

In the United States, approximately one million people — or one in every 250 — are infected with HIV, the virus that causes AIDS. The majority of people infected now — and those likely to be infected in the future — are young adults between the ages of 25 and 44, and half of our nation's 121 million workers are in this age group.

- More than two-thirds of companies with 2,500 to 5,000 employees, and nearly one in 12 small employers (fewer than 500 employees) have experienced an employee with HIV infection or AIDS.
- It is estimated that one in 100 men and one in 800 women are infected with HIV.
- AIDS ranks as the third-leading cause of death among those 25 to 44 years old and sixth among people 15 to 24 years old.

Research indicates that HIV/AIDS is one of the most costly and litigated diseases in American history. The economic impact of HIV and AIDS is staggering.

- Estimates put the cost of treating all people with HIV infection and AIDS in 1992 at $10.3 billion, up from $5.8 billion in 1991. Individually, the lifetime medical cost of treating a person with AIDS increased to $102,000 in 1992 from $85,000 in 1991. The average annual medical cost of treating an HIV-positive individual who has not developed AIDS increased to $10,000 in 1992 from $5,100 in 1991 — an almost 100% increase. These costs are projected to increase each year between 1991 and 1994. In 1995, an estimated $15.2 billion will be spent on treatment.
- The economic cost of AIDS to society was estimated at $66.5 billion in 1991. This translates to $10.9 billion worth of direct costs and $55.6 billion worth of indirect costs.

September 13, 1993

MEMORANDUM FOR KRISTINE GEBBIE

FROM JOHN PAUL GURROLA

SUBJECT DINNER INVITATION TONIGHT

Peter Petesch of Galland, Kharasch, Morris, and Garfinkle, P.C. is organizing a dinner tonight involving many of the principles of tomorrow's luncheon.

He has extended an invitation to you to attend on an informal basis.

If you are interested, please call him at 312/565-1234 x2608 or Beth Strode at 312/565-1234 x2616 to make travel arrangements.

The dinner will be at

Arnie's Restaurant
1030 North State Street
Chicago, IL

You do not need to take any action if you do not wish to attend.

TRAVEL ITINERARY FOR KRISTINE GEBBIE
SEPTEMBER 13-14, 1993

WASHINGTON, DC TO CHICAGO, IL

SEPTEMBER 13, 1993

LV: 5:00 p.m. on United Flight #623 (National Airport), Seat 28A

AR: 6:07 p.m. at Chicago OHare

HOTEL

Hyatt Regency Chicago
151 East Wacker Drive
Chicago, IL 60601
(312) 565-1234
Confirmation No. HY000355166

CHICAGO, IL TO WASHINGTON, DC

SEPTEMBER 14, 1993

LV: 5:14 p.m. on United Flight #622 (National Airport), Seat 22F

AR: 8:04 p.m.

SCHEDULED SPEECH

FOR

KRISTINE M. GEBBIE
NATIONAL AIDS POLICY COORDINATOR

DATE OF SPEECH:	Tuesday, September 14, 1993
TIME:	12 noon to 3:00 p.m.
LOCATION:	Hyatt Regency Chicago, 151 East Wacker Drive
ONAPC CONTACT:	John Paul Gurrola
SITE CONTACT:	Beth Strode 312/565-1234 X2616
REMARKS REQUIRED:	You are the main speaker at this event. Your speech is expected to last approximately 20 - 30 minutes. You actually speak at 12:45 p.m. Beth has suggested that you discuss the following topics: Health Care Reform in relation to AIDS, your policies being established, AIDS in the work place related items, and the Business Responds To AIDS program.
MEDIA COVERAGE:	About 100 Chicago based health and business reporters have been invited to this event. Beth is expecting about 20 local affiliate reporters to attend. Any one-on-one media requests will be made after the event. Beth will help facilitate these requests.
PARTICIPANTS:	There will be about 100 people in the audience. Most will be comprised of Chicago-land Chamber of Commerce members, staffers and reporters. Also speaking with you is Hank Provost, Director of Employee Relations, Motorola, Inc.; Fred Kroger, Director, National AIDS Information and Education Program in Atlanta, and Peter Petesch, of Galland, Kharasch, Morris, and Garfinkle, P.C. here in Washington.
BACKGROUND:	Beth Strode of Ogilvy, Adams and Rinehart is handling press relations for the event. She has been contracted by CDC. Judith Johns, Deputy Commissioner of Chicago's Health Department will introduce you.

GALLAND, KHARASCH, MORSE & GARFINKLE, P. C.
CANAL SQUARE
1054 THIRTY-FIRST STREET, N. W.
WASHINGTON, D. C. 20007-4492

(202) 342-5200

TELEX: 89 2520 (WU)
440297 (ITT)
TELECOPY: (202) 342-5219
(202) 337-8787

ROBERT H. MORSE
MORRIS R. GARFINKLE
EDWARD D. GREENBERG
MARK S. KAHAN
SUSAN B. JOLLIE
MARC C. GINSBERG
ANDREW B. SACKS
DAVID K. MONROE
DAVID P. STREET
MARK W. ATWOOD
ROBERT W. KNEISLEY
GERALD SEIFERT*
STEVEN JOHN FELLMAN
ROBERT D. ROSEMAN
JEFFREY K. KOMINERS
CHARLES H. WHITE, JR.
KEITH G. SWIRSKY
CHARLES H. HELEIN
ANTHONY J. McMAHON

ROBERT N. KHARASCH
JULIA A. WAYSDORF
OF COUNSEL

WILLIAM E. KLAWONN
ANDREW T. GOODSON
ERIC N. MILLER
PETER J. PETESCH
F. WILLIAM CAPLE
ANITA M. MOSNER
DONALD H. MEIERS
JOEL E. LAIKS
RICHARD BAR
GREGORY P. CIRILLO
MICHAEL A. MANDIGO
DANIEL B. HASSETT
GEORGE D. NOVAK, II*
CYNTHIA C. CRAWFORD
XIANPING WANG*
MARK N. FARMER*
HOLLY HAMILTON
MICHAEL R. CARITHERS, JR.
CAROLE A. FRERET*

*NOT ADMITTED IN D.C.

SAMUEL W. FAIRCHILD
GKMG CONSULTING SERVICES

WRITER'S DIRECT DIAL NUMBER

(202) 342-5233

September 20, 1993

Ms. Kristine Gebbie
National AIDS Policy Coordinator
1750 17th Street, N.W.
Suite 1060
Washington, D.C. 20503

Re: Chicago Conference

Dear Ms. Gebbie:

Thank you very much for speaking at the Chicagoland Chamber of Commerce and Centers for Disease Control conference on AIDS and the workplace. Your message to the attendees -- and to those who did not attend -- was an eloquent and valuable step in bringing the influence and resources of business to bear in fighting this disease and its effect on society.

Businesses' level of fear and reluctance to become involved is tremendous at this stage. You were absolutely correct with your insight that businesses "just don't get it." The fact that businesses do not get the message yet is one of the reasons why the country needs a National AIDS Policy Coordinator and is why I am delighted that you are that person. With the continued support of your efforts and the efforts of the CDC's "Business Responds to AIDS" program, business will soon get the message and act.

You should be aware that you and the panel reached persons in Chicago with access to the Chief Executive Officers of some of the country's largest corporations, persons who hopefully will make a

difference. I firmly believe that grabbing the attention of the CEO's -- the persons who take the risks for their companies -- is the most effective way to persuade businesses to make a commitment that benefits not only their company, but the community as a whole.

I enthusiastically support your efforts and hope that I will have the opportunity to work with you and work with the "Business Responds to AIDS" program again. Good luck in Nashville!

Sincerely,

Peter J. Petesch

DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Office of the Assistant Secretary
for Health
Washington DC 20201

August 18, 1993

NOTE TO KRISTINE GEBBIE

SUBJECT: Chicago/Cook County Planning Council Meeting

FROM: Jo Messore

John Krzemien, the Region V RAC, has arranged to have you invited to attend a Chicago/Cook County HIV Services Planning Council meeting on September 14, 1993. This purpose of this meeting is to bring in health care and social service organizations from the Chicago area to actively participate in developing strategies to enhance access to HIV care and resources.

You are already scheduled to give a luncheon address in at the Chicago Land Chamber of Commerce in Chicago on this date. The invitation from the planning council is for you to "drop-in", preferably in the morning during the 9:00 to 10:45 Plenary Session. An agenda for the meeting is attached.

The announcement for this meeting has already gone out. Your attendance would not be widely publicized unless you wish to have the council make an announcement in advance. The person to contact regarding this meeting is Erika Salem at (312) 744-7918 or John Krzemien, (312) 353-1385.

John Krzemien would like to meet you and, if convenient, discuss his role in the Regional Office with you. We could set up a breakfast meeting similar to the one you had with Alicia Blessington. Let me know what would work for you and I'll arrange it with John. John will be attending the planning council meeting and your presentation at the Chicagoland Chamber of Commerce meeting. Please let John and me know if we can assist you in anyway regarding arrangements for these meetings.

cc: Buck Buckingham
Retina Holmes

1993 HIV Services Planning Conference - Tuesday, September 14, Congress Hotel

CREATING A SYSTEM OF 'CARE'

-- *Eliminating Barriers to HIV Services* --

PURPOSE: Health care and social service agencies in and around the Chicago area are increasingly faced with the complexities of serving HIV-impacted individuals and families. The Chicago and Cook County HIV Services Planning Council invites health care and social service providers, and persons affected by HIV disease to a one-day planning conference to develop strategies for increasing access to HIV services. The 1993 HIV Services Planning Conference is an opportunity for area service providers to actively participate in developing strategies to enhance access to HIV care and resources across the Chicago area.

AGENDA: The morning will begin with a plenary session including an overview of the local HIV epidemiology and existing service systems. Participants will then 'break-out' into workshop groups, organized by service categories, to discuss barriers to HIV care. Following lunch, workshops will reconvene to develop strategies to eliminate these barriers within services areas, and enhance coordination of health care and social services for people affected by HIV.

8:30 - 9:00	Conference Registration
9:00 - 10:45	PLENARY SESSION:
	Introduction and Overview of Local Epidemiology
	Existing Service Systems and Funding Sources
10:45 - 12:15	WORKSHOP SESSION #1:
	Barriers to Care
12:15 - 1:45	Lunch
1:45 - 3:15	WORKSHOP SESSION #2:
	Strategies for Overcoming Barriers
	Eliminating Gaps in Services
3:30 - 4:30	Conference Wrap-up

All area health care and social service providers and individuals impacted by HIV are encouraged to attend the 1993 HIV Services Planning Conference. There is no registration fee for the conference and lunch will be provided; however, advance registration is required (see form below). For further information contact: Andrew Deppe (312) 744-4341 or Anna Lamberti (312) 633-5081.

Please complete and return this registration form by September 1, 1993. Registrations should be sent or faxed to: 1993 Planning Conference, Chicago Department of Health, Planning Division, 50 West Washington Street, Rm. 228, Chicago, IL 60602. Fax (312) 744-1696.

NAME _____ ORGANIZATION _____

ADDRESS _____ CITY/STATE/ZIPCODE _____ PHONE _____

Please indicate first and second workshop choices.

WORKSHOP CATEGORIES:

- ____ Information Dissemination
- ____ Education/Prevention
- ____ Substance Abuse/Mental Health
- ____ Medical/Dental/Primary Care
- ____ Home Health/Hospice Care
- ____ HIV Case Management
- ____ Alternative/Complementary Therapies
- ____ Suburban HIV Services and Needs
- ____ Housing Services
- ____ Support Services (transportation, food and nutritional counseling, respite care, day care, legal services, volunteer programs)

D. Patrick Lenihan
Deputy Commissioner

City of Chicago
Department of Health
Office of Planning & Policy

Daley Center, Room 227
50 West Washington Street
Chicago, Illinois 60602

312 744-7916

City of Chicago
Richard M. Daley, Mayor

Department of Health

Sheila Lyne, RSM
Commissioner

50 West Washington Street
Chicago, Illinois 60602
(312) 744-4323
(312) 744-2960 (TT/TDD)

Schedule mtg with him when you to be in Chicago

August 6, 1993

Kristine Gebbie
Director
National AIDS Program Office
Room 738-G
200 Independence Ave., S.W.
Washington, DC 20201

Dear Ms. Gebbie:

I very much enjoyed hearing your remarks and meeting you at the recent National Association of County Health Officials meeting in Chicago. It is reassuring to know that someone so firmly grounded in public health principles will be in charge of AIDS policy for the country.

I was also pleased to hear you and other speakers emphasize the need for more information, community involvement, and planning as a way to address public health issues. I think that approach has great promise for dealing with the challenges that you face in your new position. As I mentioned to you briefly following Thursday afternoon's presentation at the NACHO conference, we in Chicago have employed a strategic planning approach to address AIDS and it has proven to be the single most effective public health activity we have undertaken in dealing with this disease.

In their 1993 final report to the President, the National Commission on AIDS had as their top recommendation, the development of a national plan to guide the country's response to addressing AIDS. The need for a strategic plan is compelling. Given the vast range of needs and limited resources available to fight AIDS, a roadmap is critically needed to set a clear direction for how this country will face the HIV epidemic over the next several years. Without a clear national direction, AIDS interest groups and activists will continue their attempts to use the political process to press their demands for a larger share of the national health care dollar devoted to AIDS, and for how that allocation should be spent among alternative needs. This process can only yield disappointment and stalemate -- there simply are not enough resources for government to do all that will be demanded.

A strategic plan developed by consensus can clearly establish government's role along with that of other sectors and set priorities among competing needs. The Commission on AIDS noted that the plan should be

developed with input from national organizations and representatives from various levels of government. Developed through a participatory process, the plan becomes a covenant that establishes accountability and sets realistic limits on what can be accomplished and by whom. And drawing on such expertise, a strategic plan could be developed quickly.

Chicago took a similar approach when Mayor Richard M. Daley first took office and it proved to be very successful. During the Mayoral campaign, the City's inability to develop an AIDS strategic plan became an election issue. Daley announced early that he would develop such a plan if elected and upon taking office he quickly set the date for its completion. The decisiveness had a riveting effect in galvanizing community support. When the plan was completed and on time it was lauded by both AIDS activists and the press. Since it's development in 1989, the plan has continued to guide the City's response to addressing HIV/AIDS and helped contain demands that the City do more. Of equal importance, the plan paved the way for other health policy initiatives like the Chicago and Cook County Health Care Summit, an unprecedented local effort at more comprehensive health care reform.

This approach could be replicated with equal success on the national level. Details on how the plan would be developed could be finalized very quickly if a model that has proven successful elsewhere, like Chicago's, was followed. The availability of details to the AIDS strategic planning process in itself would be impressive and would serve to build public confidence in the effort as they would counter criticism by pundits that the candidate's health proposals lacks substance and detail.

As the project director for the Chicago AIDS Strategic Plan I would be pleased to further discuss how a national AIDS strategic plan could be completed.

Please contact me at your convenience. My phone number is 312-744-7916.

Sincerely,

Patrick Lenihan
Deputy Commissioner

Office of the National AIDS Policy Coordinator

Executive Office of the President
750 17th Street, N.W. Suite 1060
Washington, D.C. 20500

Phone: (202)632-1090
Fax: (202)632-1096

Deliver To: Jo Messore

Sent From:

XX Kristine Gebbie, RN, MN, National AIDS Policy Coordinator
Retina Holmes

Number of Pages: 2 + Cover Fax Number: 690-7560 Date: 8/26/93

Message:

Attached is a copy of a letter sent to Kristine in which she would like to meet with this gentleman while she is in Chicago on the 14th of September.

GALLAND, KHARASCH, MORSE & GARFINKLE, P. C.
CANAL SQUARE
1054 THIRTY-FIRST STREET, N. W.
WASHINGTON, D. C. 20007-4492

(202) 342-5200

TELEX: 89 2520 (WU)
440297 (ITT)
TELECOPY: (202) 342-5219
(202) 337-8787

ROBERT H. MORSE
MORRIS R. GARFINKLE
EDWARD D. GREENBERG
MARK S. KAHAN
SUSAN B. JOLLIE
MARC C. GINSBERG
ANDREW B. SACKS
DAVID K. MONROE
DAVID P. STREET
MARK W. ATWOOD
ROBERT W. KNEISLEY
GERALD SEIFERT*
STEVEN JOHN FELLMAN
ROBERT D. ROSEMAN
JEFFREY K. KOMINERS
CHARLES H. WHITE, JR.
KEITH G. SWIRSKY
CHARLES H. HELEIN
ANTHONY J. McMAHON

ROBERT N. KHARASCH
JULIA A. WAYSDORF
OF COUNSEL

WILLIAM E. KLAWONN
ANDREW T. GOODSON
ERIC N. MILLER
PETER J. PETESCH
F. WILLIAM CAPLE
ANITA M. MOSNER
DONALD H. MEIERS
JOEL E. LAIKS
RICHARD BAR
GREGORY P. CIRILLO
MICHAEL A. MANDIGO
DANIEL B. HASSETT
GEORGE D. NOVAK, II*
CYNTHIA C. CRAWFORD
XIANPING WANG*
MARK N. FARMER*
HOLLY HAMILTON
MICHAEL R. CARITHERS, JR.
CAROLE A. FRERET*

*NOT ADMITTED IN D.C.

SAMUEL W. FAIRCHILD
GKMG CONSULTING SERVICES

WRITER'S DIRECT DIAL NUMBER

(202) 342-5233

August 9, 1993

By Facsimile and Mail (202) 690-7054

Ms. Kristine Gebbie
National AIDS Policy Coordinator
1750 17th Street, N.W.
Suite 1060
Washington, D.C. 20503

Re: Chicagoland Chamber of Commerce Conference

Dear Ms. Gebbie:

The Chicagoland Chamber of Commerce and I are very excited that you have agreed to be the keynote speaker at the Chamber's September 14 conference on AIDS in the Workplace. The conference itself is scheduled for September 14 at the Hyatt Regency, Chicago from noon until approximately 3:00 p.m. A draft agenda is attached.

We propose a twenty to thirty minute talk from you, as our first speaker, which would include a medical and statistical update on the issue, and then a discussion on AIDS as a public policy issue and the Clinton Administration's commitment on the matter. Perhaps you could then explain how this broader public policy and health issue is also a workplace issue, and why the business community should become involved.

Following your talk, I will address the legal concerns stemming from this issue (under the Americans With Disabilities Act, ERISA, the National Labor Relations Act, and OSHA

regulations), and how a proactive legal strategy fits in with an AIDS education program and other practical business considerations. We also expect a speaker from Motorola Corporation, a leader in the Chicago business community, on its efforts to develop an AIDS policy. Finally, a representative from the Centers for Disease Control will describe its "Business Responds to AIDS" program, its available resources, and its principles for a workplace AIDS policy.

We are happy to report that the Centers for Disease Control will be a co-sponsor of the event, providing its excellent logistical and promotional support. The combined efforts of the Chamber and the CDC should provide an audience of approximately 250 to 300 persons. In addition, however, we expect substantial print, radio, and television press coverage for the event. For this reason, if your schedule permits, you may wish to be available to the press for talk shows that morning.

We will continue to update you on our progress in organizing this event. Please do not hesitate to contact me, John Skorburg at the Chamber (312/580-6971) or Angie Hammock at CDC (404/639-0979). We are honored that you will be joining us, and look forward to working with you.

Sincerely,

Peter J. Petesch

Attachment

cc: John W. Skorburg, Chief Economist and
Director of Governmental Affairs,
Chicagoland Chamber of Commerce

Angie Hammock, Centers for
Disease Control

DRAFT AGENDA

BUSINESS RESPONDS TO AIDS

CHICAGOLAND CHAMBER OF COMMERCE/CENTERS FOR DISEASE CONTROL

September 14, 1993
Hyatt Regency Hotel
Chicago, Illinois

12:00 p.m. OPENING REMARKS AND INTRODUCTION

Joel Daly, Channel 7 News (Tentative)

(Mr. Daly will give a brief overview on the issue of AIDS in the workplace, introduce the four speakers, and outline the structure of the session)

Luncheon

12:45 p.m. AIDS IN THE WORKPLACE AND PUBLIC POLICY

The Honorable Kristine Gebbie, National AIDS Policy Coordinator, The White House

(Ms. Gebbie will address AIDS as a public policy issue and explain the Clinton Administration's commitment on the issue; she will also explain how this broader public policy issue is a workplace issue and how and why the business community should become involved.)

1:15 p.m. AIDS AND LEGAL CHALLENGES TO BUSINESSES

Peter J. Petesch, Galland, Kharasch, Morse & Garfinkle, P.C.

(Mr. Petesch will explain the legal concerns -- under the Americans With Disabilities Act, the National Labor Relations Act, ERISA, and other laws -- that warrant developing an AIDS policy for the workplace. He will also review OSHA regulations on blood borne pathogens. Finally, he will describe a proactive legal strategy on dealing with the issue that is supported by and consistent with practical business considerations.)

1:45 p.m. DEVELOPING AND IMPLEMENTING AN AIDS POLICY

A speaker to be determined, hopefully from Motorola Corporation

(The speaker will address practical considerations in developing and implementing an AIDS policy from

the viewpoint of a company's human resources department. He will speak from personal experiences, and address such issues as disclosure, confidentiality, reasonable accommodations, and dealing with co-workers' concerns.)

2:15 p.m. BUSINESS RESPONDS TO AIDS PROGRAM

A speaker from the Centers for Disease Control and Prevention

(The speaker will describe the Business Responds to AIDS program, the resources available from the CDC, and the principles endorsed by the CDC in developing a workplace policy.)

2:45 p.m. QUESTION AND ANSWER SESSION/CLOSING COMMENTS

(The moderator will open the floor for questions pertaining to the presentations or on other workplace issues not addressed during the session.)

GALLAND, KHARASCH, MORSE & GARFINKLE, P. C.
CANAL SQUARE
1054 THIRTY-FIRST STREET, N. W.
WASHINGTON, D. C. 20007-4492

(202) 342-5200

TELEX: 89 2520 (WU)
440297 (ITT)
TELECOPY: (202) 342-5219
(202) 337-8787

ROBERT H. MORSE
MORRIS R. GARFINKLE
EDWARD D. GREENBERG
MARK S. KAHAN
SUSAN B. JOLLIE
MARC C. GINSBERG
ANDREW B. SACKS
DAVID K. MONROE
DAVID P. STREET
RICHARD M. LORENZO*
MARK W. ATWOOD
ROBERT W. KNEISLEY
GERALD SEIFERT*
STEVEN JOHN FELLMAN
ROBERT D. ROSEMAN
JEFFREY K. KOMINERS
CHARLES H. WHITE, JR.
KEITH G. SWIRSKY
CHARLES H. HELEIN

ROBERT N. KHARASCH
ANTHONY J. McMAHON
DARD F. STAGG*
JULIA A. WAYSDORF
OF COUNSEL

DANIEL R. KIMBALL
WILLIAM E. KLAWONN
ERIC N. MILLER
PETER J. PETESCH
F. WILLIAM CAPLE
ANITA M. MOSNER
DONALD H. MEIERS
ANDREW T. GOODSON
MICHAEL T. DEAN
JOEL E. LAIKS
RICHARD BAR
JOHN R. DeGREGORIO
MICHAEL A. MANDIGO
DANIEL B. HASSETT
CYNTHIA C. CRAWFORD
XIANPING WANG*
MARK N. FARMER*
HOLLY HAMILTON*
CAROLE A. FRERET*

*NOT ADMITTED IN D.C.

GEORGE F. GALLAND (1910-1985)

WRITER'S DIRECT DIAL NUMBER

(202) 342-5233

July 21, 1993

BY HAND
Ms. Christine Gebbie
AIDS Czar
The White House
1600 Pennsylvania Ave., N.W.
Washington, D.C. 20500

Dear Ms. Gebbie:

Congratulations on your appointment as the national coordinator on AIDS policy. I believe that your appointment will make a great impact in the war against AIDS.

Marc Ginsberg of my office has been kind enough to have this letter delivered to you. I have been involved as an attorney in educating businesses on legal issues relating to AIDS in the workplace. Last April, I was the legal speaker of the Governor's Conference in Little Rock on "Business Responds to AIDS." I was invited to speak by The Centers for Disease Control and The National Leadership Coalition on AIDS. A crucial part of the "legal" approach I advocate involves encouraging workplace AIDS education. I was encouraged by the level of interest shown by the businesses on this issue, and intend to continue speaking at similar conferences nationwide.

The Chicagoland Chamber of Commerce informed me that they will sponsor a seminar on the issue for their membership in mid-September (September 14, 15 or 16). I am writing to ask whether you would be interested in being the keynote speaker at this event.

I support your efforts as the AIDS Czar and hope that you will consider speaking at the Chicago conference. I would be delighted to meet with you and discuss the conference and our work on this issue generally. I have enclosed a copy of my paper from the Little Rock conference for your information.

Good luck with your work!

Very truly yours,

Peter J. Petesch

Enclosure

GALLAND, KHARASCH, MORSE & GARFINKLE, P. C.
CANAL SQUARE
1054 THIRTY-FIRST STREET, N. W.
WASHINGTON, D. C. 20007-4492

(202) 342-5200

TELEX: 89 2520 (WU)
440297 (ITT)
TELECOPY: (202) 342-5219
(202) 337-8787

ROBERT H. MORSE
MORRIS R. GARFINKLE
EDWARD D. GREENBERG
MARK S. KAHAN
SUSAN B. JOLLIE
MARC C. GINSBERG
ANDREW B. SACKS
DAVID K. MONROE
DAVID P. STREET
RICHARD M. LORENZO*
MARK W. ATWOOD
ROBERT W. KNEISLEY
GERALD SEIFERT*
STEVEN JOHN FELLMAN
ROBERT D. ROSEMAN
JEFFREY K. KOMINERS
CHARLES H. WHITE, JR.
KEITH G. SWIRSKY
CHARLES H. HELEIN
ANTHONY J. McMAHON

ROBERT N. KHARASCH
DARD F. STAGG*
JULIA A. WAYSDORF
OF COUNSEL

WILLIAM E. KLAWONN
ANDREW T. GOODSON
ERIC N. MILLER
PETER J. PETESCH
F. WILLIAM CAPLE
ANITA M. MOSNER
DONALD H. MEIERS
JOEL E. LAIKS
RICHARD BAR
GREGORY P. CIRILLO
MICHAEL A. MANDIGO
DANIEL B. HASSETT
GEORGE D. NOVAK, II
CYNTHIA C. CRAWFORD
XIANPING WANG*
MARK N. FARMER*
HOLLY HAMILTON
MICHAEL R. CARITHERS, JR.
CAROLE A. FRERET*

*NOT ADMITTED IN D.C.

SAMUEL W. FAIRCHILD
GKMG CONSULTING SERVICES

WRITER'S DIRECT DIAL NUMBER

(202) 342-5265

July 21, 1993

By Hand

William A. Galston
Office of Domestic Policy
The White House
1600 Pennsylvania Avenue, N.W.
Washington, D.C. 20500

Dear Bill:

One of my colleagues, Peter Petesch, has been active in making presentations on legal issues relating to AIDS in the workplace. He is currently arranging an event to be sponsored by the Chicagoland Chamber of Commerce. Bill, I would be most grateful if you would pass Peter's attached letter and materials on to Christine Gebbie. Peter hopes that Ms. Gebbie will consider speaking at this event.

Thank you for your consideration.

Very truly yours,

Marc C. Ginsberg

Enclosure

Galland, Kharasch, Morse & Garfinkle, P.C.

MATERIALS ON HIV, AIDS

AND THE

LEGAL CHALLENGES TO BUSINESSES

Arkansas Governor's Conference
Business Responds to AIDS

by Peter Petesch

Phone: ***(202)342-5233***
Telecopy: ***(202)342-5219***

HIV, AIDS AND THE LEGAL CHALLENGES TO BUSINESSES

by Peter J. Petesch

I. Introduction

A. Key to the legal problem is: education, preparation, compassion, and common sense.

B. Magic Johnson Principle:

1. It can happen to you or your best employees.

2. Employees often can still work and be productive.

3. But they may need a reasonable accommodation.

4. Panic by co-workers can create a Hobson's Choice.

II. HIV infected persons are covered by Americans With Disabilities Act.

A. Focus is on individuals' present ability to do the job (not speculation that person might not become unproductive).

B. Can the person perform the essential functions of the job?

1. Develop an understanding of what the "essential functions" are.

2. Don't exclude people based on stereotypes.

C. Don't do HIV screening tests.

III. Reasonable Accommodation

A. With HIV infected persons, the accommodation might be as simple as altering scheduling or creating more rest periods, if that.

B. Still, avoid paternalism -- assuming a person shouldn't do a job.

IV. Addressing concerns of others

A. Employees' refusal to work due to "unsafe working conditions" is only protected under labor laws (NLRA and OSHA) if the refusal to work based on imminent danger to health and safety is grounded in good faith, reasonably held belief.

B. Plan ahead and avoid disruption by educating the workforce.

V. Developing a policy

A. Principles to follow:

1. Base employment practices on best scientific evidence available.

2. Management and Union leadership should endorse policy of nondiscrimination.

3. Work with other managers on how to respond.

4. Keep sensitive medical information confidential.

5. Educate employees about HIV before any incident occurs.

a. i.e.: HIV can't be transmitted from phone, drinking fountain, or restroom facilities.

6. Employee Assistance Programs AP should offer information and referral to agencies with supportive services to persons with HIV.

B. Plan ahead with policies, changes in employee manuals, personnel directives, and understandings with any unions.

GALLAND, KHARASCH, MORSE & GARFINKLE, P. C.
CANAL SQUARE
1054 THIRTY-FIRST STREET, N. W.
WASHINGTON, D. C. 20007-4492
(202) 342-5200

DEVELOPING AN AIDS POLICY FOR YOUR WORK PLACE©

Earvin "Magic" Johnson's revelation that he is infected by the HIV virus shattered the myth that "HIV and AIDS can't happen to me." It should have also shattered employer's myths that "it can't happen to my work force." Mr. Johnson is living proof that HIV can affect your most valued and productive employees. His post-retirement performance on the Dream Team in Barcelona and in the NBA All-Star game demonstrated that he can still perform his job at the same level of excellence. His second retirement from the NBA, however, also proved that the fears of co-workers can poison the work environment. Like Magic Johnson, other productive employees with HIV can work their job and generally need to keep working. The convergence of Magic's story and the Americans With Disabilities Act forces you to reject the "it can't happen to me" approach and instead prepare for "when it happens to me." Not only must you learn to deal with infected employees and applicants, but you must be prepared to address the fears of the uninfected work force. The goal of this paper is to explain the law, and to design a practical system to deal fairly with HIV infected employees, while minimizing both litigation expenses and disruption to business.

This paper was prepared by Peter J. Petesch of Galland, Kharasch, Morse & Garfinkle as a service to firm clients. Mr. Petesch specializes in employment law and litigation.

I. THE ADA

A. The ADA Applies to HIV Infected Individuals

The Americans With Disabilities Act (ADA) became effective for most employers in July 1992. Like other anti-discrimination laws, the ADA covers employment decisions at virtually all stages, including recruitment, job application procedures, hiring and discharge, transfers, layoffs, employee compensation and benefits, promotions, training, and work assignments. Persons with HIV and persons associated with HIV infected persons are protected under the ADA. Refusing to hire, segregating, denying benefits, reassigning, or discharging a person simply on the basis of that person's HIV infection is unlawful. For example, reassigning a salesperson with HIV to a position not involving public contact would violate the ADA. The ADA also extends to persons associated with disabled persons. For example, you cannot deny a job to a partner of a person with AIDS based on the assumption that the otherwise qualified applicant will probably miss work frequently to care for the partner. Also, discharging an employee rumored to have AIDS would be unlawful. Finally, the ADA prohibits discrimination on the basis of a person's use of medication, such as AZT, to treat the disability.

B. Emphasis on Present Ability to Do the Job

The ADA allows you to impose job restrictions based on "bona fide occupational qualifications." The test for treating individuals differently on the basis of bona fide occupational qualifications is an objective one. In other words, your subjective belief that an HIV infected applicant could pose a danger to the work place is not a justifiable reason for excluding that person from employment. This also means that an HIV infected employee cannot be excluded based on the fear that the employee will someday suffer prolonged absences from work or that

he or she could adversely affect group health insurance rates. The focus of the ADA is the employee's present condition and ability to do the job.

The ADA protects disabled individuals who, with or without a "reasonable accommodation," can perform the "essential functions" of the position that the person holds or desires. The ADA, like all other anti-discrimination legislation, does not require you to hire or employ persons who objectively are not qualified to perform the real functions of a particular position. You should therefore develop a checklist of the objective, essential requirements of a job and evaluate each applicant or employee against that list -- making sure the "essential functions" on the list are indeed "essential" -- and be sure that hiring decisions are supported by reference to the essential functions of the job (and are properly documented).

C. Avoiding Stereotyping and Unfounded Fears

Although you may deny employment to a person -- whether disabled or not -- who poses a direct threat to the health or safety of other persons or property, that determination must be made on an objective, case-by-case basis and cannot be grounded in generalizations or fears over the person's disease. The fear of spreading AIDS has not justified denying employment opportunities on the basis of health or safety threats. HIV is not spread through everyday, non-sexual contact. As such, there is no medical justification for restricting HIV infected employees from customer contact, use of phones and office facilities, or eating facilities. For example, the current literature from the Centers for Disease Control explains that food service workers, including cooks, flight attendants, counter workers, and waiters, pose no special risk to fellow employees or customers if they are HIV positive, provided that reasonable precautions are taken. Adopting a neutral practice of restricting any employee -- HIV positive or otherwise -- with

lesions or who is bleeding from public contact or food handling should satisfy your legitimate interest in guarding the health and safety of other employees and the public.

A federal court interpreting the Rehabilitation Act, which mirrors language in the ADA, held that the District of Columbia violated the law by rejecting a firefighter applicant because he was HIV-positive. The court found that there was no measurable risk that his disease would be transmitted through his firefighting duties and found that his HIV status would not impair his ability to perform the job. The court specifically rejected the fire department's contention that the public's perception of a fire department with HIV-positive firefighters had to be considered. This consideration, the court held, is not legitimate grounds for denying employment to disabled people. The court awarded him back pay plus $25,000 in damages "for the emotional pain he has been made to endure due to the city's ill-conceived fears and prejudices."

D. Making Reasonable Accommodations for Protected Employees

The ADA requires you to make "reasonable accommodations" to give otherwise qualified disabled persons equal opportunity to work. You cannot choose a non-disabled applicant over a disabled applicant simply because you would have to make a reasonable accommodation in order to enable the disabled person to fulfill the requirements of the position. In fact, you must notify applicants of your obligation to make reasonable accommodations.

Whether an accommodation is "reasonable" depends largely on whether or not making the accommodation would place an undue hardship on you, in view of cost and degree of disruption associated with the accommodation compared with your size and type of business, financial strength, and structure of operations. In the case of an HIV infected employee, the potential accommodation of modifying or restructuring the individual's schedule, or allowing for a rest

period, will not likely be considered unduly difficult. You should be aware that the potential "reasonable accommodations" of reducing an individual's schedule or reassigning that person to a lower-paying position can be accompanied by a reduction in pay if that reduction would be made for individuals who are not disabled.

E. Avoiding Paternalism

You must distinguish the need to make reasonable accommodations from paternalism that could lead to inadvertent ADA violations. You may perceive a need to protect an HIV infected employee, fearing that the employee will be more susceptible to opportunistic infections that accompany contact with the public, bad weather, or even co-workers. Reassigning an employee from public contact based on the fear that the employee could easily catch a disease may violate the ADA. It is therefore better to make the employee or applicant responsible for raising concerns over his or her limitations instead of simply deciding yourself. It is not unlawful, however, for you to discuss this concern with the employee in making a reasonable accommodation available.

II. ADDRESSING CONCERNS OF OTHER EMPLOYEES

The ADA forces you to combat your own fears and the fears of your employees and customers -- just as you must ignore the stereotypes perceived by others in order to comply with other anti-discrimination laws. You should impress upon other employees the need to work and cooperate with HIV-infected employees. Otherwise, you may find yourself in a quandary by complying with the ADA if other employees panic at the prospect of working or sharing equipment with someone infected with HIV. For example, a concerted refusal to work may be regarded as protected conduct under federal labor laws, whether the work force is unionized or

not. A single employee who refuses to work with an HIV infected co-worker could conceivably assert a claim under the Occupational Safety and Health Act, asserting that the refusal to work is justified by a perceived imminent danger to his or her health and safety.

Labor cases create an opening in which you need not be subjected to the tyranny of employees' fears. A refusal to work based on imminent danger to health and safety must be grounded in a good faith belief and be objectively reasonable. The National Labor Relations Act protects protesting an "unsafe working condition," but only if the employee has a good faith, reasonably-held belief that an unsafe condition exists. Preparing and educating the work force with materials such as the Surgeon General's Report on AIDS may therefore help avert not only a practical personnel crisis, but also a costly legal Hobson's Choice.

III. INTERVIEWS AND SCREENING TESTS

Using tests or the interview process to screen-out individuals with HIV also violates the ADA. Under the ADA, pre-employment inquiries and tests are restricted to the applicant's ability to perform job-related functions. You may not inquire about disabilities or medical history unless it is necessary to assess qualifications or to ensure safety on the job. As such, you should not require AIDS screening or even ask whether an applicant is HIV positive in the interview process. Having this information can only taint the hiring process and expose you to ADA liability and litigation. Having this information and not controlling its dissemination can also expose you to tort liability for invasion of privacy.

IV. ENFORCEMENT PROCEDURES AND THE COSTS OF NON-COMPLIANCE

Courts and administrative agencies tend to move slowly, and this time factor works against an HIV infected plaintiff for whom time is finite. The plaintiff who decides to go

forward, however, will likely receive sympathetic treatment. The ADA employment discrimination provisions include the same enforcement mechanisms as Title VII of the Civil Rights Act. The aggrieved person must first file a complaint with the Equal Employment Opportunity Commission. The employee can pursue reinstatement, back pay, costs and attorney's fees, and compensatory and punitive damages set by a fixed schedule under the Civil Rights Act of 1991. The Equal Employment Opportunity Commission and state agencies enforcing parallel state anti-discrimination laws often move slowly due to the backlog of complaints before them. For some complainants, such as HIV-infected persons, time is of the essence. Although the concept of an expedited enforcement procedure (as with Age Discrimination laws) is logically applicable in AIDS cases, the current ADA regulations do not provide expedited treatment of cases alleging HIV discrimination.

Once an ADA plaintiff gets to court, he or she can pursue an order compelling a return to the job. The ADA expressly allows for injunctive relief, such as reinstatement. In addition to permanent injunctions ordered at the end of a case, litigants may also be able to obtain preliminary injunctions. For example, a teacher with AIDS obtained an injunction stopping the county department of education from reassigning him to a position without student contact. The court noted that the reassignment caused immediate emotional and psychological harm, and, in the case of AIDS, a delay in returning to satisfying work -- even if only for a few months -- represented "precious, productive time irretrievably lost to him."

The reality that employers will face with the ADA, as with all Civil Rights litigation, is that the claimant will initially have the help of a governmental body and then, if litigation follows, can recover attorneys' fees and costs if he or she prevails. Litigation expenses include

fees to expert witnesses, such as vocational rehabilitation experts testifying on available accommodations or medical experts testifying on the nature of the claimant's disease and the particular physical limitations of the claimant. In a hotly contested case, this adds significantly to your financial exposure. Conversely, you do not get attorney's fees if you prevail.

V. DEVELOPING THE POLICY

Planning ahead with and following a compliance program minimizes your exposure to litigation and investigations that will prove costly even if you are ultimately vindicated. Although no one policy will suit the needs of each employer, the following underlying principles should apply:

1. Employment practices should be based on the best scientific evidence available. Current medical evidence supports the conclusion that persons with AIDS or HIV infection do not pose a risk to anyone through ordinary work place contact.

2. Management and union leadership should unequivocally endorse nondiscrimination toward HIV infected employees. When a manager or co-worker is not sure how to respond to an HIV infected employee, he or she should contact the personnel department immediately.

3. Medical information should be kept confidential.

4. Employee education on HIV infection should be undertaken immediately, before any incidents of HIV infection occur, in order to minimize work disruption.

5. Existing Employee Assistance Programs should offer information and referral to agencies and organizations with supportive services for persons with HIV.

Whether the policy is written or unwritten depends largely on your existing practice with respect to other personnel policies. Today, most employers have written personnel manuals. If so, the personnel manual's section on non-discrimination and disability should be updated. In

some instances, a special personnel directive should be issued. Regardless of the form it takes, the slight time commitment and negligible expense of such preventative action will result in a more compassionate work place, greater efficiency, and lower long term legal costs.

VI. CONCLUSION

Understanding your responsibilities under the ADA and balancing those obligations with other labor laws and the personal views of the work force presents a complex task, but one that cannot be ignored. Planning ahead can help avoid the problems and mistakes that may occur with hasty, emotional reactions once the problem presented by an HIV infected employee becomes a reality.

Withdrawal/Redaction Marker
Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001. resume	[Personally Identifiable Information] [Partial] (1 page)	00/00/0000	b(6)

COLLECTION:
Clinton Presidential Records
National AIDS Policy Office
Kristine Gebbie
OA/Box Number: 3771

FOLDER TITLE:
Chicago and Chamber of Commerce Conference, 9/13-14/1993

2018-0756-F
jp4829

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

P1 National Security Classified Information [(a)(1) of the PRA]
P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
P3 Release would violate a Federal statute [(a)(3) of the PRA]
P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [a)(5) of the PRA]
P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.
PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).
RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

b(1) National security classified information [(b)(1) of the FOIA]
b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
b(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
b(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

PETER J. PETESCH

BIRTHPLACE AND DATE: (b)(6)

EDUCATION: Juris Doctor; Georgetown University 1985
Bachelor of Arts; University of Michigan 1982

EMPLOYMENT HISTORY:

1986-Present — Galland, Kharasch, Morse & Garfinkle, P.C.

Litigate and counsel in labor and fair employment, business tort, civil RICO, and international business disputes. Representation on labor matters includes collective bargaining negotiations, NLRB and EEOC investigations, labor arbitrations, hiring and discharge practices, employment manual drafting, and enforcement of employment agreements. Published articles on Americans With Disabilities Act and on Developing an AIDS Policy for the Workplace.

[001]

1985-1986 — Sherman, Dunn, Cohen, Leifer & Counts, P.C.

Counselled Building and Construction Trades Department (AFL-CIO) on employee substance abuse issues.

BAR ADMISSIONS: Washington, D.C. and Maryland, United States Courts of Appeals for the Fourth and Ninth Circuits, United States District Court for the District of Columbia.

PROFESSIONAL ASSOCIATIONS: American Bar Association, Inter-American Bar Association.

LANGUAGES: Fluent in Spanish.

PERSONAL: Mr. Petesch resides in Rockville, Maryland with his wife and two children.

GALLAND, KHARASCH, MORSE & GARFINKLE, P.C. is a Washington, D.C. firm with a regional, national and international practice. Since its founding in 1955, GALLAND, KHARASCH, MORSE & GARFINKLE has assembled a team of talented attorneys committed to serving the needs of clients promptly, efficiently, and effectively. The firm's practice areas include:

- Advertising, public relations and marketing law
- Antitrust and trade regulation law
- Aviation law
- Corporate and commercial law
- Energy and public utilities law
- Food and drug law
- Government contracts law
- Intellectual property law
- International trade law
- Labor and employment law
- Legislative affairs and government relations
- Litigation
- Maritime law
- Real estate
- Surface transportation law
- Telecommunications
- Trade and professional associations law