

DEPARTMENT GENERAL ORDER 11-06

OFFICE of the CHIEF OF POLICE

DATE: September 2, 2011

Bloodborne Pathogens

PURPOSE.

The purpose of this policy is to provide officers with guidelines for preventing the contraction of the HIV virus, Hepatitis B Virus, Hepatitis C Virus and other bloodborne pathogens.

POLICY

It is the responsibility of this law enforcement agency to take all reasonable measures to allow its members to perform their duties in a safe and effective manner. The safe performance of daily operations is threatened by viruses that can be contracted through exposure to blood borne pathogens. Therefore, it is the policy of this agency to provide employees with information and education on prevention of these diseases, provide up-to-date safety equipment and procedures that will minimize their risks of exposure and to institute post-exposure reporting, evaluation and offer treatment for all members exposed to these diseases.

DEFINITIONS

Body Fluids: Blood, semen and vaginal fluids or other secretions that might contain these fluids such as saliva, vomit, urine or feces.

Exposure Control Plan: A written plan developed by this agency and available to all employees that details the steps taken to eliminate or minimize exposure and evaluate the circumstances surrounding exposure incidents.

Personal Protective Equipment: Specialized clothing or equipment worn by members for protection against the hazards of the job. This does not include standard issue uniforms and work clothes without special protective qualities.

Universal Precautions: Procedures as defined by the CDC, (Center for Disease Control), designed to prevent transmission of human immunodeficiency virus, (HIV), Hepatitis B virus, (HBV), Hepatitis C (HCV) virus and other bloodborne pathogens.

PROCEDURES

A. General Disease Prevention Guidelines

1. This agency's exposure control plan shall provide the overall strategy for limiting exposure to HIV, HBV and HCV; and responding to exposure incidents.
2. This agency subscribes to the principles and practices for prevention of HIV, HBV and HCV as detailed in the "universal precautions" prescribed by the CDC and the federal regulations of the Occupational Safety and Health Administration. Where otherwise not detailed in this policy, employees shall be guided by these practices and procedures

B. Workplace Controls and Personal Protective Equipment

1. In order to minimize potential exposure, officers should assume that all persons are potential carriers of HIV, HBV and HCV.
2. When appropriate Personal Protective Equipment is available, no member shall refuse to arrest or otherwise physically handle any person who may carry the HIV, HBV or HCV virus.
3. Members shall use protective equipment under all appropriate circumstances unless the member can demonstrate that in a specific instance, its use would have prevented the effective delivery of health care or public safety services or would have imposed an increased hazard to his safety or the safety of another co-worker.

All such instances shall be reported by the member and shall be investigated and appropriately documented to determine if changes could be instituted to prevent similar occurrences in the future.

4. Disposable gloves should be worn when handling any persons, clothing or items with bodily fluids on them.
5. Masks in combination with eye protection devices such as goggles or glasses with solid side shields, or chin length face shields should be worn whenever splashes, spray, spatter or droplets of potentially infectious materials may be generated and eye, nose or mouth contamination can be reasonably anticipated.
6. Gowns, aprons, lab coats, clinic jackets or other outer garments should be worn as determined by the degree of exposure anticipated.

7. Authorized barrier/resuscitation devices that does not permit blood or other potentially infectious materials to pass through, will be used whenever an officer performs CPR or mouth-to-mouth resuscitation.

8. All used sharps instruments such as knives, scalpels and needles shall be handled with extraordinary care and should be considered contaminated items.

a. Leather gloves or other protective equivalent shall be worn when searching persons or places or dealing in environments such as accident scenes, where sharp objects and bodily fluids may reasonably be encountered.

b. Needles will not be recapped, bent, broken, removed from a disposable syringe or otherwise manipulated by hand.

c. Needles shall be placed in departmentally provided, puncture resistant, leak proof containers that are marked as bio-hazardous when being collected for evidence, disposal or transportation purposes.

d. Searches of automobiles or other places should be conducted using a flashlight, mirror or other devices where appropriate.

9. Officers shall not smoke, eat, drink, handle contact lenses or apply makeup around bodily fluid spills, or areas where there is reasonable likelihood of occupational exposure.

10. Any evidence contaminated with bodily fluids shall be completely dried, double bagged and marked to identify potential or known communicable disease contamination.

C. Custody and Transportation of Prisoners

1. Officers should not put their fingers in or near any person's mouth.

2. Individuals with bodily fluids on their persons shall be transported in separate vehicles from other persons. The individual may be required to wear a suitable protective covering if he is bleeding or otherwise emitting bodily fluids.

3. Officers have an obligation to notify relevant support personnel during a transfer of custody when the suspect has bodily fluids present on his persons, or has stated that he has a communicable disease.

4. Officers shall document on the appropriate arrest or incident form when a suspect taken into custody has bodily fluids on his person, or has stated that he has HIV, HBV or HVC.

5. Suspects taken into custody with bodily fluids on their persons shall be directly placed in the designated holding area for processing. The holding area shall be posted with an "Isolation Area-Do Not Enter" sign.

D. Housekeeping

1. Supervisors and their employees are responsible for the maintenance of a clean and sanitary workplace and shall conduct periodic inspections to ensure that these conditions are maintained.
2. All supervisory personnel shall determine and implement written schedules as appropriate for cleaning and decontamination based on the location within the facility or work environment, the type of surface or equipment to be cleaned, the type of soil present and the tasks and procedures to be performed in the area.
3. All equipment and environmental and work surfaces must be cleaned and decontaminated after contact with blood and other potentially infectious materials as provided in this policy.
4. Any protective coverings used in laboratory, evidence custody or enforcement operations for covering surfaces or equipment shall be removed or replaced as soon as possible following actual or possible contamination.
5. Bins, pails and similar receptacles used to hold actual or potentially contaminated items shall be labeled as biohazardous, decontaminated as soon as feasible following contamination as well as inspected and decontaminated on a regularly scheduled basis.
6. Broken and potentially contaminated glassware, needles or other sharp instruments shall not be retrieved by hand but by other mechanical means and shall not be stored in a manner that requires that they be retrieved manually.
7. Officers shall remove clothing that has been contaminated with bodily fluids as soon as practical and with as little handling as possible. Any contacted skin area shall be cleansed in the prescribed fashion.
8. Contaminated laundry and personal protective equipment shall be bagged or containerized at the location where it is used in departmentally approved leak proof containers but shall not be sorted, rinsed or cleaned at that location.
9. Only employees specifically designated by the chief executive shall discard actual or potentially contaminated waste materials. All such disposal shall conform with established federal, state and local regulations.

E. Disinfection

1. Any unprotected skin surfaces that come into contact with bodily fluids shall be thoroughly washed as soon as possible with hot running water and soap for at least 15 seconds before rinsing and drying.

- a. Alcohol or antiseptic towelettes may be used where soap and water are unavailable.
- b. Disposable gloves should be rinsed before removal and hands and forearms should then be washed.
- c. Skin surfaces shall be washed and mucous membranes flushed as soon as feasible following the removal of any personal protective equipment.
- d. All open cuts and abrasions should be covered with waterproof bandages before reporting to duty.
- e. Hand lotion should be applied after disinfection to prevent chapping and to seal cracks and cuts on the skin.

2. Disinfection procedures shall be initiated whenever there are bodily fluids present or an individual with bodily fluids on his person is transported in a departmental vehicle.

- a. A supervisor shall be notified and the vehicle taken to the service center as soon as possible.
- b. Affected vehicles shall be immediately designated with the posting of an "Infectious Disease Contamination" sign upon arrival at the service center and while awaiting disinfection.
- c. Service personnel shall remove any excess bodily fluids from the vehicle with an absorbent cloth, paying special attention to any cracks, crevices or seams that may be holding fluids.
- d. The affected areas should be disinfected using hot water and detergent or alcohol and allowed to air dry.
- e. All police vehicles taken to a service center for scheduled washing and routine maintenance shall as part of that routine, be cleaned in the interior with an approved disinfectant.

3. Nondisposable equipment and areas upon which bodily fluids have been spilled shall be disinfected as follows:

- a. Any excess bodily fluids should first be wiped up with approved disposable absorbent materials.
- b. A freshly prepared solution of one part bleach to 10 parts water or a fungicidal/ mycobactericidal disinfectant shall be used to clean the area or equipment.

F. Supplies

1. Supervisors are responsible for continuously maintaining an adequate supply of disease control supplies in a convenient location for all affected personnel in their unit. This includes, but is not limited to, ensuring that:

- a. Personal protective equipment in appropriate sizes, quantities and locations are available.
 - b. First aid supplies and disinfecting materials are readily available at all times.
 - c. Hypoallergenic gloves and other materials are available for those who are allergic to materials normally provided, and cleaning laundering and disposal, as well as repair or replacement of these and other items is provided
2. All department vehicles shall be continuously stocked with the following supplies.
 - a. Personal protective equipment in appropriate size and quantity for affected personnel to include face and eye protective devices, coveralls, disposable gloves and booties, puncture resistant and leak proof containers for needles and other sharp objects, barrier resuscitation equipment and leak proof plastic bags.
 - b. Liquid germicidal cleaner
 - c. Disposable towelettes (70% isopropyl alcohol)
 - d. Waterproof bandages.
 - e. Appropriate identification labels and tape for Bio Hazard Material for disposal.
 - f. "Isolation Area-Do Not Enter" signs
 3. Officers using supplies from their vehicles are responsible for ensuring that they are replaced as soon as possible.
 4. Officers are required to keep disposable gloves in their possession at all times while on duty.

G. Vaccination, Exposure, Evaluation and Treatment

1. All members of this agency who have been determined to be at risk for occupational exposure to the hepatitis B virus shall be provided with the opportunity to take the HBV vaccination series at no cost within 10 working days of assignment to an occupationally exposed duty. The vaccination shall be provided if desired only after the member has received required departmental training has not previously received the vaccination series and only if not contraindicated for medical reasons.
2. Any person who has unprotected physical contact with blood or other bodily fluids of another person while in the line of duty shall be considered to have been potentially exposed to HBV and/or HIV.

3. In cases of exposure, a supervisor shall be contacted who shall complete appropriate duty injury and medical forms and shall take appropriate steps to document the means and circumstances under which the exposure occurred.
4. Immediately after exposure, the officer shall proceed to the designated health care facility for tests of evidence of infection and treatment of any injuries.
 - a. This agency shall ensure continued testing of the member for evidence of infection and provide psychological counseling as determined necessary by the health care official.
 - b. The members shall receive a copy of the health care provider's written opinion within.
5. Any person responsible for potentially exposing a member of this agency to a communicable disease shall be encouraged to undergo testing to determine if the person has a communicable disease.
 - a. The person shall be provided with a copy of the test results and a copy shall be provided to the exposed agency member. The member shall be informed of applicable state laws and regulations concerning the disclosure of the identity and infectious status of the source individual.
 - b. Criminal charges may be sought against any person who intentionally exposes a member of this agency to a communicable disease.
6. Officers who test positive for HIV, HBV, or HCV may continue working as long as they maintain acceptable performance and do not pose a safety and health threat to themselves, the public or other members of this agency.
 - a. This agency shall make all decisions concerning the employee's work status solely on the medical opinions and advice of the agency's health care officials.
 - b. The agency may require an employee to be examined by the department health care officials to determine if he is able to perform his duties without hazard to himself or others.
7. If in fact the subject was diagnosed as having an infectious disease the officer will be advised of appropriate medical precautions and treatment.
8. All members of this agency shall treat employees who have contracted a communicable disease fairly, courteously and with dignity.

H. Record Keeping

1. This agency's personnel function shall maintain an accurate record for each employee with occupational exposure that includes information on vaccination status; the results of

all examinations, tests and follow-up procedures; the health care professional's written opinion; and any other germane information provided by the health care professional.

2. These health care records shall be retained in a secured area with limited access for the duration of the member's employment plus 30 years and may not be disclosed or reported without the express written consent of the member.

I. Training

1. This agency's training officer shall ensure that all members of this agency with potential of occupational exposure are provided with a complete course of instruction on prevention of bloodborne diseases before their initial assignment.

2. All identified affected employees shall receive annual refresher training and additional training whenever job tasks or procedures are modified in a manner that may alter their risk of exposure.

3. All trainees shall have access to applicable federal and state regulations pertaining to the regulation of blood borne pathogens.

4. The training officer shall ensure that complete records are maintained on member training to include information on the dates and content of training sessions, names and qualifications of persons conducting the training and the names and job titles of all persons attending the training sessions. These records shall be maintained for a period of three years from the date of training.

BY ORDER OF:

THOMAS J. BYRNE
Chief of Police

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