

Exposure to Bodily Fluids, Infectious Material or Communicable Disease

Order Number

23.5

Date

11-04-19

23.5 Exposure to Bodily Fluids, Infectious Material or Communicable Disease

- A. Exposure to communicable diseases, including blood borne pathogens (BBP) and diseases transmitted through the air, is a hazard of law enforcement work. This policy is intended to assist *employees* in minimizing this risk through the use of appropriate work practices, the use of personal protective equipment (PPE) and prompt evaluation and treatment *should* exposure occur.
- B. The following job *classifications* have been identified as those reasonably anticipated to have some occupational exposure to communicable diseases:
 - 1. All sworn personnel
 - 2. Professional staff employees assigned to evidence control
 - 3. Police Volunteers

23.5.1 Exposure Control Officer

The *Chief shall* designate an exposure control *officer*. This *officer shall* be responsible for (in conjunction with the *Chief*) implementation and revision of this exposure control policy, provision of PPE, arranging for necessary medical examination and follow-up in the event of an exposure, and training upon initial assignment and annually thereafter of *personnel* in exposure control and the exposure control plan. Individual unit *supervisors* are responsible for ensuring that their *personnel* attend scheduled training and follow the practices and procedures required by this policy.

23.5.2 Blood Borne Pathogens Exposure Control Plan

- A. Blood borne pathogens *may* include HIV/AIDS, Hepatitis B Virus and Hepatitis C Virus, among others.
- B. HIV/AIDS is a virus that attacks a person's immune system, weakening their resistance to other diseases. There is no known vaccine or cure for the virus. It is transmitted from one person to another through sexual contact, sharing of drug needles or by contact between infected body fluids or other potentially infectious materials (any body secretion), any bodily orifice, or an open wound or rash.



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The Hepatitis viruses are viral infections that *may* result in jaundice, cirrhosis, or cancer of the liver. The incubation period is from six weeks to six months; carriers of the virus *may* appear well. These viruses *may* be transmitted by open wounds or mucous membrane, coming into contact with contaminated needles, body fluids or other potentially infectious materials.

- C. Hazard communication and preventative measures which are to be observed by *employees* include the following.
 - 1. Employees should frequently wash their hands (with soap and warm water or provided cleansing agents). Employees should wash immediately after removing gloves or other potentially infectious materials. Employees should not, following physical contact with any person, eat, drink or smoke until they have washed their hands.
 - 2. Collect, handle and transport biological evidence using personal protective equipment and following proper evidence collection, packaging and transportation procedures, including the placement of all body fluids or other potentially infectious materials in properly labeled leak-proof containers. This includes having access to Material Safety Data Sheets.
 - 3. Sharp objects that are evidence shall be placed in marked, puncture resistant biohazard containers.
 - With the exception of meals provided to prisoners, food or drink is not permitted in the jail booking area or evidence submission areas. Employees will not apply cosmetics or lip balm, handle contact lenses, eat, drink, smoke, or place food or drink on or near any storage device or surface which contains body fluids or other potentially infectious materials or is used for the packaging of body fluids or other potentially infectious materials.
 - 5. Avoid stepping in any body fluids or other potentially infectious materials.
 - If blood or other potentially infectious materials penetrate clothing, the garment shall be removed immediately or as soon as possible. Contaminated laundry will be bagged or placed in a container immediately or as soon as possible.



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- 7. PPE and other regulated waste shall be disposed of in properly labeled biohazard bags and receptacles.
- 8. Contaminated work surfaces (i.e. evidence processing areas) will be decontaminated with an appropriate disinfectant after contamination.

23.5.3 Personal Protective Equipment (PPE); Universal Precautions

- A. Employees shall take universal precautions when dealing with any situation involving the potential for exposure to blood and body fluids, including OPIM. Employees shall use PPE at all times and treat all such substances as if infectious.
- B. PPE including gloves, masks, eye protection or face shields, and antiseptic hand cleaner or towelettes and binoculars for viewing hazardous material incidents from a safe distance will be supplied by the Department and readily available in work areas where hazardous and/or biohazard materials may be encountered.

Specific PPE needs are to be determined by the *Chief* upon the recommendation of the Exposure Control *Officer*. Depending on the likelihood of exposure, PPE *may* also include:

- respirators
- 2. gowns, aprons or other protective clothing
- 3. disposable gloves or similar protective items
- 4. one-way airways for CPR

PPE will be replaced or repaired by the Department as needed

C. Supervisors shall monitor the use of PPE as required by this policy.

23.5.4 Tuberculosis (TB) Exposure Control Plan

A. Tuberculosis is a disease caused by bacteria. Symptoms of TB include a persistent cough, bloody sputum, chest pain, fever, night sweats, weight loss and



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extreme fatigue. The disease is transmitted when a person who has TB sneezes, coughs or speaks. A person *may* become infected by inhaling the airborne material released by the infected person. Most people who become infected with the TB bacteria *will* not develop the disease, but *will* have a positive reaction to a skin test.

- B. Preventative measures. If an *employee* believes a person has or *may* have infectious TB, the *employee should* wear an N95 respirator to prevent inhalation of the infection. Close contact *should* be minimized and the person *should* be moved outside or the area *should* be ventilated to the extent possible.
- C. If it is necessary to transport a person with TB, the *employee should* wear an N95 respirator, transport the person directly to the hospital, avoid transporting anyone else at the same time, operate the vehicle air recycling system on at high speed on a non-recirculating cycle and open all windows (weather permitting).
- D. An *employee* who has been exposed to a person known or suspected of having TB *shall* immediately contact a *supervisor*. Both the exposed *employee* and the *supervisor must* complete the appropriate paperwork, including the *report* of exposure and chemical/biological contamination exposure form.
 - 1. The *employee shall* seek a medical evaluation, either with the *Town physician* or with the *employee's* own *physician*, and *shall* receive an initial TB skin test. If the initial test is negative, it *will* be repeated in three months. *Employees* who test positive *will* be evaluated for preventive therapy and retested as required.
 - 2. An *employee* who has infectious TB *shall* begin treatment and *shall* not return to work until cleared to do so by the *Town physician*.

23.5.5 Employee Exposure to Blood Borne Pathogens

A. An *employee* who is or may have been exposed to a blood borne pathogen *shall* immediately contact a *supervisor* and *will* be taken to the nearest hospital where an infection control doctor *should* be consulted. If hospital treatment is not necessary, or if an infection control doctor is not available, the *employee may* choose to be treated by their own *physician*. In any instance examination and treatment *should* not be delayed.



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- B. Immediate decontamination is recommended. Soap and water, along with a disinfecting agent *should* be used.
- C. Preventative treatments are available for certain types of exposures, but treatment *must* begin within *TWO HOURS* or as soon thereafter as possible. *Employees must* be aware that waiting more than 48 hours greatly diminishes the effectiveness of treatment.
- D. Supervisors are responsible for assisting exposed employees, including contacting employees who are no longer on the scene and may not realize the potential for exposure. All clothing and equipment must be decontaminated (see below).
- E. Worker's compensation coverage and OSHA regulations require exposed *employees* to have a baseline blood draw taken; *employees* are encouraged to do so immediately. To protect an *employee's* rights to file a future claim of infection or illness due to a significant occupational exposure, *employees must*:
 - 1. Within 24 hours of a possible significant exposure that arises out of, and is in the course of employment, file all necessary *reports*.
 - Complete a baseline blood test within ten days after the possible significant exposure. This test is intended to determine that the *employee* is free of the infection or illness at the time of exposure.
 - 3. Test for the HIV infection or Hepatitis A, B, and C within thirty days of a significant exposure.
- F. Exposed *employees* are also entitled to, and are encouraged to make themselves available for, follow-up blood draws and tests as recommended by the treating *physician* or *Town physician*. Medical evaluation and counseling *will* be at *Department* expense. All test results are strictly confidential. Exposure *reports will* be filed with the exposure control *officer* after having been reviewed by the Human Resources Director.
- G. Both the exposed *employee* and the *supervisor must* complete the appropriate paperwork, including the *report* of injury and chemical/biological contamination exposure form. Exposure forms, medical reports, and worker's compensation reporting forms *will* be forwarded to the Human Resources Director and filed with



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the exposure control *officer* for a time period of 13 years beginning with the date the *employee* separates from *Town* employment.

23.5.6 Testing Sources of Significant Exposure

An effort *should* be made to test the person who is the source of a significant exposure of an *employee* for communicable diseases. Testing is done by blood draw; most tests are done voluntarily with the consent of the person being tested, or the person's family if the person is deceased. A *supervisor should* be contacted to discuss the matter with the person who is the source of the exposure and to seek consent.

If consent is not provided, <u>A.R.S. 13-1210</u> permits an employee or volunteer, or the agency itself, to file a petition with Superior Court for an order authorizing the testing of the person for HIV, common blood borne diseases and other diseases listed in the petition if there are reasonable grounds to believe an exposure occurred in certain specified circumstances. Contact the employee's supervisor for assistance in getting a court order for the blood draw.

If the person is deceased and the family does not consent to the blood draw, <u>A.R.S. §11-594</u> provides that a blood sample may be provided by the medical examiner as long as the collection or release will not interfere with the examination.

If there is *probable cause* to gather the *evidence* for law enforcement purposes (for example, because the type of assault charged depends on the seriousness of the exposure), the *evidence may* also be gathered through a *search warrant*.

23.5.7 Decontamination of Public Areas or Public Property

- A. When it is necessary to clean up large amounts of bodily fluids from a public area or publicly owned property, *officers may* contact a contractor appointed by the *Town*, for scene decontamination.
- B. For clean-up of small amounts of contamination, the following procedures *should* be followed:
 - 1. To clean small areas, use gloves and, if necessary, safety goggles and facemask. Use a 1:100 solution of bleach and water, or a similar cleaner. Allow the cleaner to sit for several minutes before wiping.



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- 2. For contaminants directly on the hands, skin or mucous membranes, and following the removal of latex gloves in contact with contaminates, the affected areas *should* be washed immediately with soap and warm water, scrubbing vigorously for 20 seconds. If either mouth or eyes are involved, flushing with warm water for at least 10-15 minutes is standard.
- 3. For contaminated vehicles, use a 1:100 solution of bleach and water, scrub all areas, and allow the bleach to soak in for 5-10 minutes and then rinse. Contaminated vehicles are not to be used until properly decontaminated; when there is concern about the effectiveness of the decontamination process, the *Town* contractor *should* be contacted.
- 4. For equipment (handcuffs, batons, flashlights), wear latex gloves and use a 1:100 solution of bleach and water.
- C. Contaminated clothing *should* be handled with latex gloves, kept separate from other laundry in marked plastic bags and washed in soap and warm water, or given to the *Town* contractor for cleaning. *Employees will* not take contaminated uniforms or clothing home to be laundered. Shoes and leather gear *should* be scrubbed with soap and hot water.

