

<b>SEMINOLE COUNTY SHERIFF'S OFFICE</b>  <b>GENERAL ORDER</b>	<b>NUMBER:</b>  G - 37
	<b>RESCINDS:</b>
<b>SUBJECT:</b> Exposure Control Plan and Personal Protective Equipment (PPE)	
<b>EFFECTIVE:</b> November 14, 1994	
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**I. POLICY:**

Committed to the health and safety of employees, the Sheriff's Office embraces a universal precautions philosophy that requires personnel to treat all human blood and certain human body fluids as if infected with Human Immunodeficiency Virus (HIV), Hepatitis B Virus, and other blood borne pathogens. The following procedures are provided to manage potential occupational exposure to hazardous substances and infectious diseases, and in accordance with OSHA Standard 29 CFR 1910.1030, "Occupational Exposure to Blood Borne Pathogens." This Exposure Control Plan (ECP) details our agency's implementation and compliance assurance plan to protect our employees and provide a safe and healthy work environment.

**II. SCOPE:**

- A. Employees will need to assess the specific risks of each operation and determine the appropriate PPE to protect against respiratory and/or dermal hazards. Employees should use the greatest level of protection available and practical, to carry out the job function at hand. Supervisors are expected to work in partnership with employees to correct safety shortcomings and deficiencies within their areas

of responsibility. Employees observing safety deficiencies will bring the issue to a supervisor's attention.

- B. All employees (including volunteers) are provided training and safety information to minimize risk from exposure to hazardous substances and infectious diseases, and to increase understanding of the nature of those hazards. The Director of the Human Resources Division (or designee) determines exposure risk based on job descriptions developed through job task analysis. The Director of the Inmate Medical Division of the Correctional Facility, given the facility's daily potential both for exposure and role in intervention, and the Special Services Captain, maintain active involvement in the development, refinement, and implementation of the ECP.
- C. The Director of Human Resources and the Captain of the Special Services Division (or designee) will review General Order #37, Exposure Control Plan and Personal Protective Equipment, annually; and direct it to be revised, if necessary, to reflect changes in job assignments involving occupational exposure, changes in industry standards, or to update procedures designed to eliminate or minimize occupational exposure.
- D. Employees should maintain awareness for possible exposure on all calls for service, and treat all unknown substances as if they contain hazardous chemicals such as Fentanyl, synthetic opioids, or other unknown substances.

### **III. DEFINITIONS:**

- A. *Air Purifying Respirator:*  
Any full or half-face respirator, designed to work with or without cartridges, capable of filtering out certain identified contaminants.
- B. *Biological Agents:*  
Any living organism, naturally occurring or man-made, that is capable of causing death, disease or harm to any human, plant or animal. Included in this category are bacteria, viruses and toxins.
- C. *Chemical Hazards and Toxic Substances:*  
A substance that is capable of causing death, serious injury or incapacitation through its physiological effects. Included in this category are asphyxiates, nerve agents, choking agents, blister agents, synthetic opioids and toxic industrial chemicals. Chemical hazards and toxic substances pose a wide range of health hazards such as irritation, sensitization, and carcinogenicity and physical hazards such as flammability, corrosion, and explosibility.
- D. *Communicable Disease:*  
An infectious disease capable of being passed to another by contact with an infected person, body fluids, or infected materials.
- E. *Decontamination:*  
The removal or neutralization of chemical and biological hazards from equipment, facilities or persons.
- F. *Universal Precautions:*  
Accepted methods of control; engineering-out safety and exposure hazards and proper use of personal protective equipment to protect employees from injury or illness.
- G. *Personal Protective Equipment:*  
Specialized clothing or equipment worn by employees for protection against chemical and biological hazards; general work clothes (uniforms, etc.) not intended to function as protection against biohazards are not considered personal protection equipment.

- H. *IDLH [Immediately Dangerous to Life or Health]:*  
An atmospheric concentration of any toxic, corrosive or asphyxiate substance that poses an immediate threat to life or would cause irreversible or delayed adverse health effects.
- I. *OSHA [Occupational Safety and Health Administration]:*  
The federal agency regulating workplace safety and health standards.
- J. *Regulated (Biohazard) Waste:*  
Liquid or semi-liquid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially infectious materials.
- K. *Synthetic Opioid:*  
Opioids are a type of narcotic pain medication that works by binding to opioid receptors. Synthetic opioids are manufactured in a chemical laboratory with a similar chemical structure to natural opiate drugs. They can be illicit drugs or legally prescribed to treat pain, or used as anesthesia during surgery. Examples include Fentanyl or Carfentanil.

**IV. BIOHAZARD WARNINGS:**

- A. Employees at risk of exposure to chemical or biological hazards must be familiar with the warning labels associated with these materials.
- B. Warning labels containing the word "Biohazard" and the biohazard symbol will be fluorescent orange or orange-red. Warning labels for chemicals are usually black and white and may contain language such as "Danger" or "Poison." Additional warning labels such as "Suspected Fentanyl" or "Inhalation Hazard" are also white and typically have a skull and crossbones symbol. All have symbols and lettering in a contrasting colors. Labels will be an integral part of the container or affixed in a way that prevents its loss or unintentional removal.
- C. Biohazard or chemical warning labels will be affixed to each container of regulated waste or other potentially infectious or caustic material, including all biohazard waste containers, refrigerators, freezers and other containers for biohazardous or caustic materials. Red bags for biohazardous or chemical material may be substituted for labels.



**V. EXPOSURE RISK DETERMINANTS:**

- A. Job duties creating the expectation of occupational exposure to chemical or biological hazards include (but are not limited to) the following:
1. Providing first aid,
  2. Processing crime scenes/drug labs where chemical or biological hazards are present,
  3. Entering an area where the presence of body fluids can be expected,
  4. Handling inmates with known/unknown incidences of infectious diseases,

5. Gathering and handling evidence contaminated with body fluids or chemicals,
6. Arrest situations involving physical confrontations,
7. Exposure to sewage or working with bathroom plumbing,
8. Responding to overdose scenes,
9. Search Warrants,
10. Traffic stops,
11. Calls for service,
12. Transportation of drug evidence,
13. Person down situations where cause is unknown,
14. Suspected narcotics located on a person or at a scene, and
15. Searching or patting down an individual or suspect.

B. Employees having occupational exposure to chemical and biological hazards are considered at risk of exposure. Determination of risk is made by Director of the Human Resource Division, with input from the Division Captains or Directors, based on the duties of employees in each job classification. In this category are:

1. Corrections facility employees, including FDLE certified personnel, nursing and maintenance personnel.
2. Crime Scene Analysts, Latent Print Analysts and Evidence Specialists.
3. All sworn personnel including Reserve Deputy Sheriffs.
4. Field Service Specialists, Judicial Personnel, Investigative Analysts, assigned to register felons.
5. Citizens on Patrol volunteers.
6. School Crossing Guards.
7. All personnel assigned to Probation.
8. All personnel assigned to PAY (Prosecution Alternatives for Youth).
9. All personnel assigned to Youth Intervention Services.
10. Victim Advocates.

**NOTE:** Pursuant to Florida Administrative Code, the Director of the Human Resources Division annually reviews this list. Current updates are available to all employees in the Human Resources Division.

**VI. TRAINING:**

A. All new hire employees (to include those who are hired for positions where the risk of occupational exposure may occur) will receive Infectious Disease training by the Human Resources Division prior to assignment.

B.. Familiarization with the Sheriff's Office exposure control plan for all new employees and volunteers begins with infectious disease training.

1. Blood Borne Pathogen Training:

- a. Basic epidemiology, modes of transmission, and symptoms of infectious diseases.
- b. Exposure control procedures including the use and limitations of methods that may prevent or reduce exposure, including personal protective equipment.
- c. Procedures or methods that might cause exposure to infectious materials,
- d. Explanation of procedures to follow at an incident involving blood or other potentially infectious materials.
- e. Procedures to follow if exposure to infectious material occurs.
- f. Post-exposure reporting, hospital evaluation, and medical follow-up procedures.
- g. Signs, labels, and color-coding used in identifying biohazard materials.
- h. The Hepatitis Vaccination Program of the Sheriff's Office.
- i. Types, proper use, removal, location, handling, decontamination and disposal of personal protective equipment and cleanup kits.
- j. Biohazard waste disposal procedures.
- k. A questions and answer period.

**NOTE:** Video is an acceptable training method, and trained personnel are available at the Inmate Medical Division to answer general questions – must call the on-duty Charge Nurse.

2. Infectious Disease refresher training is required annually for all employees identified as having occupational risk of exposure, to include employees assigned to the John E. Polk Correctional Facility. Training is delivered to all employees online via NEOGOV Learn.

C. For all new employees hired for positions identified as being at risk for exposure, Respirator Safety training is available on-line on Power DMS. Employees are familiarized with at least the following:

1. Respirator Safety Training:

- a. Procedures when you must wear a disposable filtering facepiece respirator (FFR) to protect yourself against airborne contaminants.
- b. The process of putting on (donning) and taking off (doffing) your FFR.
- c. A user seal check is a way to verify that your FFR has been properly positioned on your face to assure a proper seal, and must be performed each time you put a FFR on to ensure it has been donned correctly.

2. At least once every three years, Respirator Safety Refresher training is recommended for all employees in positions that have been identified as having occupational exposure risk to infectious diseases, and is available on Power DMS to view at any time.

**VII. HEPATITIS VACCINATION PROGRAM:**

- A. At the end of the training video, Hepatitis vaccines are offered to each employee hired for positions that have been identified as having occupational exposure risk to infectious diseases. The employee must either elect or decline the Hepatitis A and/or B vaccine on the form in order to complete the training process.
  1. Vaccinations are offered at a reasonable time and place and at no charge to the employee, and will be administered under the supervision of a physician or licensed health care professional.
  2. Employees who decline the vaccine, but who later decide to be inoculated may receive the vaccine at a reasonable time and place and at no cost to him/her.
  3. Employees who elect to receive the Hepatitis vaccine will be provided with the Hepatitis Vaccination Option (Employees in At-Risk Positions) Form by the Human Resources Division, who will also schedule an appointment for the employee to receive the vaccination.

**VIII. EXPOSURE TO COMMUNICABLE DISEASES AND OTHER HAZARDS:**

- A. Primary communicable diseases of concern to Sheriff's Office employees include:
  1. HIV (Human Immunodeficiency Virus)
  2. Hepatitis
  3. Tuberculosis
  4. Meningitis (Meningococcal)
- B. Exposure to HIV or Hepatitis occurs when a person's blood or other body fluid transfers to another person's blood stream. During the performance of duty this may occur by the following means:
  1. Needle stick/puncture wound exposure (accidental stick while searching individuals or places),
  2. Open wound exposure which includes abraded skin, dermatitis conditions, cuts, or sores,
  3. Human bites, and
  4. Mucous membrane contact such as with the eyes, nose, or mouth.
- C. Exposure may occur by contact with body fluids or droplet spray from talking, coughing, vomiting, or by coming into contact with contaminated objects. There are two types of exposures-significant and non-significant. Both require a point of entry (i.e. open wound and/or mucous membrane).
  1. A significant exposure would involve:
    - a. Blood, or contact with
    - b. Spinal or Synovial Fluids
    - c. Amniotic, Pleural, Peritoneal Fluids
    - d. Semen and Vaginal Secretions
    - e. Any Body Fluid Visibly Contaminated with Blood

2. A non-significant exposure would involve:
  - a. Saliva, Tears, Sweat
  - b. Vomitus
  - c. Nasal secretions, sputum
  - d. Feces, urine

D. Exposure to chemical or toxic substances may occur when chemicals are absorbed into the body by all means, including injection, oral ingestion, contact with mucous membranes, inhalation and via transdermal transmission (through the skin). Accidental exposures can occur under a number of circumstances, including processing crime scenes, performing lifesaving efforts, the execution of search warrants, purchasing drugs in an undercover capacity, field testing drugs, or processing non-drug evidence such as drug proceeds, pill presses, scales or drug paraphernalia.

**IX. EXPOSURE REPORTING:**

- A. Upon receiving a wound or exposure to a communicable disease, a hazardous chemical exposure, or other hazard, employees will immediately notify a supervisor.
- B. If an employee is injured and exposed, or just exposed to biohazardous materials or hazardous chemicals:
  1. If it is a significant exposure, the supervisor will initiate a call to the agency contracted provider, Advent Health, and their Post Exposure Nurse (PEN) Exposure Hotline at 888-807-1020, and select option 2. The supervisor will provide the requested information to the intake person (i.e. employee (s) information, incident information, location of the source subject, and provide two contact numbers for each affected employee.
  2. A supervisor completes a First Report of Injury and an exposure form, and emails it to the Human Resources Division at [emprel@seminolesheriff.org](mailto:emprel@seminolesheriff.org).
  3. If it is a hazardous chemical exposure, request the fire department and EMT's respond, or take the employee (s) to the hospital.
  4. Hospital paperwork is sent to the Human Resources Division through interoffice mail or by scanning and emailing the information to [emprel@seminolesheriff.org](mailto:emprel@seminolesheriff.org) as soon as possible. This stands if an employee is treated at a hospital, Centra Care, or by a Post Exposure Nurse (PEN).
- C. Post-exposure evaluation procedures include repeat antibody testing, counseling and post exposure prophylaxis (as may be medically indicated).
- D. Medical records for employees having occupational exposure are maintained in accordance with the Florida Division of Library and Information Services – Records Management General Reference Schedules.

**X. GENERAL PRECAUTIONS AND EXPOSURE CONTROLS:**

- A. Employees at risk of occupational exposure to infectious diseases or chemical hazards will observe universal precautions to prevent contact with blood, chemicals or other potentially infectious or caustic materials.
- B. Blood or other potentially infectious material will be considered infectious, regardless of the perceived status of the source individual.

- C. Extraordinary care should be exercised when conducting searches of suspects, inmates, cells, inmate's property, vehicles, residences, etc. Hands should never be placed in areas where they may come into contact with sharp objects that could puncture the skin.
- D. Employees should ensure that all open wounds or cuts on their person are bandaged so that direct contact with contaminated body fluids can be avoided.
- E. Hands and other skin surfaces or mucous membranes should be washed and/or flushed immediately and thoroughly if contaminated with blood or other bodily fluids or chemicals. Hands should be washed immediately after gloves are removed. If facilities with soap and water are not readily available, a germicidal disinfectant will be used, with soap and water cleansing to follow as soon as possible.

**NOTE:** Germicidal disinfectants should not be used when exposed to chemical hazards.

- F. Powder free Nitrile gloves, with a minimum thickness of 5 mil will be worn when it is anticipated there will be contact with blood or other potentially infectious materials, chemicals or other potential caustic material, or when handling or touching contaminated surfaces. Disposable, single-use gloves will be replaced when contaminated, when torn and punctured, or when their ability to function as a barrier is compromised. Disposable gloves will not be washed or decontaminated for reuse. Gloves will be removed using proper removal process to prevent further contamination.
- G. Shower facilities are located at hospitals, fire stations, at the John E. Polk Correctional Facility, in the Wellness Center, all SNP Region offices and the Special Operations Division.
- H. Eye protection and fluid resistant masks will be worn if splash, spray, spatter, blood droplets or other potentially infectious or chemical materials might be generated, or where any eye, nose or mouth contamination is possible during a cleanup or decontamination.

I. *Handling Sharps:*

Employees will handle sharps with extreme caution to avoid skin punctures. Sharp items will be stored or disposed of in puncture resistant containers marked with the words "WARNING: CONTAINS SHARPS." Sharp objects that may be contaminated will be picked up by mechanical means or with appropriate hand protection.

J. *Crime Scene, Forensic Laboratory, Arrest, and Handling Inmates:*

Exercise caution and wear disposable powder free Nitrile gloves when performing any of the following:

1. Handling items which may contain contaminated blood or body fluid.
2. Searching arrestees and inmates.
3. When processing or examining items of evidence, powder free Nitrile gloves will be used. Double gloves will be used if handling evidence that is suspected of containing chemical or toxic hazards.
4. If placing fingers near anyone's mouth.
5. If cleaning blood or other secretions contaminating floors, seats, or other equipment.

K. *Handling Infectious or Chemical Materials:*

1. The collection, handling, processing, storage, transport and shipping of all potentially infectious or chemical materials will be in leak proof containers.
2. Containers of specimens of potentially infectious or chemical materials will be appropriately labeled or color-coded and sealed before being stored, transported or shipped. If the outside of the primary container becomes contaminated, that container will be placed into a second, leak proof container that is properly labeled and color-coded. Chemical or biohazardous evidence collected for submission to a state or federal laboratory for testing, will be packaged in accordance with General Order 68, Evidence and Property.
3. All evidence suspected of containing chemicals, specifically synthetic opioids or other unknown hazards, will be marked and packaged in accordance with General Order 68, Evidence and Property. It is not recommended that chemicals, specifically synthetic opioids or other unknown hazards, be transported in the occupant compartment of any vehicle. SUV style vehicles may utilize a plastic container to minimize secondary exposure, keeping in mind it may become contaminated and require proper decontamination. Gun vaults should not be used as containers to transport evidence suspected of containing chemicals.

L. *Tools and Equipment Handling:*

1. ASP's, flashlights, handcuffs or other equipment contaminated with blood or other potentially infectious materials will be decontaminated with a hypochlorite (ten-to-one water/bleach solution).
2. The interior and exterior of vehicles contaminated with blood or other potentially infectious materials will be decontaminated with a hypochlorite solution. The back seat and other detachable items will be removed from the vehicle and cleaned separately to ensure that the item has been completely decontaminated.
3. Any vehicle, tool or equipment that is exposed to a chemical hazard will be decontaminated under the guidance of the Seminole County Fire Department's Hazardous Material Team. A supervisor and the PPE Program Coordinator will be notified and all efforts to keep contaminated items isolated will be implemented to prevent secondary exposure.
4. After use, personal protective equipment (including any contaminated undergarments) will be removed in accordance with training before leaving the perimeter of the exposure area. Items will be placed in a red biohazard bag or a location designated for storage, washing, decontamination or disposal.

M. *Cleaning and Disinfecting:*

All surfaces exposed to blood or other potentially infectious materials will be cleaned and disinfected using a ten-to-one water/bleach solution, or an agency-approved disinfectant. Cleanup kits will be used on equipment and surfaces exposed to blood or other potentially infectious material.

N. All surfaces or equipment exposed to chemical or other potentially caustic materials will be cleansed using an agency approved decontamination solution. Cleanup kits will be used on equipment and surfaces exposed to chemicals or other potentially caustic material.

O. All surfaces exposed to chemical hazards that continue to present IDLH environment will be cleansed under the guidance of the Seminole County Fire Department's Hazardous Material Team or contracted vendor.

P. Do not eat, drink or smoke while performing any operations involving any chemical or biological hazards.

- Q. The PPE Program Coordinator or the Seminole County Fire Department's Hazardous Material Team should be notified when there are questions on decontamination.

**XI. PERSONAL PROTECTIVE EQUIPMENT:**

- A. Personal protective equipment is provided to employees identified as having exposure potential. This equipment is to be located in a conspicuous manner as to make it readily accessible to all employees, carried in an assigned vehicle, carried on his/her person, and is available in designated areas at the John E. Polk Correctional Facility. The following are the minimum standards for each employee should this type of equipment be required in the event of an exposure control situation:

1. Part Time School Crossing Guards:
  - a. Powder free Nitrile gloves, 5 mil
  - b. Antiseptic hand cleaner
2. Full Time School Crossing Guard and Citizens on Patrol volunteers:
  - a. Powder free Nitrile gloves, 5 mil
  - b. Emergency blanket (vehicle kit)
  - c. Antiseptic hand cleaner
  - d. First aid kit (vehicle kit)
  - e. CPR mask (if trained)
3. Personnel assigned to PAY (Prosecution Alternatives for Youth), Probation Officers, non-sworn personnel assigned to Youth Intervention Services, Judicial personnel, Investigative Analyst assigned to register felons, Code Enforcement Officers and Specialists, Field Service Specialists, adult and juvenile intake and Correctional Facility employees, including FDLE certified personnel, nursing and maintenance personnel, and Victim Advocates:
  - a. Powder free Nitrile gloves, 5 mil,
  - b. Emergency blanket (vehicle issued),
  - c. Antiseptic hand cleaner,
  - d. First aid kit (vehicle issued),
  - e. CPR mask,
  - f. N-95 respirator mask,
  - g. Gown and shoe covers that provides liquid splash and particulate protection and meets industry standards,
  - h. Biohazard bag, and
  - i. Eye protection that meets industry standards.

**Note:** The Director of the Inmate Medical Division may authorize the use of latex gloves for nursing staff.

4. All sworn personnel including Reserve Deputy Sheriffs, Crime Scene Analysts, Latent Print Analysts and Evidence Specialists:
    - a. Powder free Nitrile gloves, 5 mil,
    - b. Emergency blanket (vehicle issued),
    - c. Antiseptic hand cleaner,
    - d. First aid kit (vehicle issued),
  5. CPR mask,
  6. N-95 respirator mask,
  7. Gown and shoe covers that provides liquid splash and particulate protection and meets industry standards,
  8. Biohazard bag,
  9. Eye protection that meets industry standards, and
- B. Additionally personal protective equipment for employees in specialized positions (e.g., Crime Scene Analysts, Health Services nursing and medical staff, S.W.A.T Team, Emergency Response Team, Hazardous Device Team, C.C.I.B., Corrections Response Team, units assigned to a Federal Task Force, and Underwater Search and Rescue Team) may include the following:
1. Level A, B or C protective garments,
  2. Dry suit,
  3. Powered Air Purifying Respirator (PAPR),
  4. Self-Contained Breathing Apparatus,
  5. Self-Contained Underwater Breathing Apparatus,
  6. CN, CS and CBRN cartridges,
  7. Half face cartridge type respirator, or
  8. Silicone or Butyl full face air purifying respirator.
- C. Employees are responsible for conducting routine inspections of their issued personal protective equipment to ensure its continued operational integrity. Employees are also responsible for cleaning or replacing their equipment after its use (or disposal). Weather, heat and other conditions may reduce the protective ability of this equipment. If signs of deterioration are present, replacement is necessary.
- D. **Employees will use appropriate personal protective equipment when there is a potential for exposure. Employees should choose the greatest level of protection available and practical to carry out the job function at hand.**
- E. Employees may decline the use of personal protective equipment when, in their judgment, its use will prevent delivery of lifesaving first aid or will pose an increased hazard to the employee or others.
- F. Personal protective equipment or underlying garments penetrated by blood, infectious materials, or other chemical or toxic substances will be removed as soon as possible. Skin areas under the equipment or garment will be cleaned with an appropriate disinfectant until washing with soap and running water is possible.

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- G. Personal protective equipment will be removed before leaving the perimeter of the exposure area following proper doffing procedures. After use, disposable personal protective equipment will be placed in a red biohazard bag. Reusable personal protective equipment will be placed in an area or container designated for storage, washing and decontamination.
- H. Surgical/examination-type powder free Nitrile gloves will be worn when it is anticipated there will be contact with blood or other potentially infectious or chemical materials, or when handling or touching contaminated surfaces. Disposable, single use gloves will be replaced when contaminated, when torn and punctured, or when their ability to function as a barrier is compromised. Disposable gloves will not be washed or decontaminated for reuse.
- I. Eye protection and fluid resistant masks will be worn whenever splashes, spray, spatter, blood droplets or other potentially infectious or chemical materials may be generated, or where any eye, nose or mouth contamination is possible during handling or a cleanup.
- J. Protective gloves will be worn when:
1. Touching blood and bodily fluids, mucous membranes, or non-intact skin,
  2. Handling or touching contaminated items or surfaces,
  3. Handling items or surfaces soiled with blood or body fluids,
  4. Conducting subject/inmate invasive (search) procedures,
  5. Conducting screening and physical assessments of inmates,
  6. Transporting inmates to and from the Medical Section or during the movement of ill inmates, and
  7. Powder free Nitrile gloves will be doubled when dealing with any unknown substance that may contain chemical or toxic hazards, specifically synthetic opioids. If available, contrasting colored gloves is preferred.
- K. Procedures for wearing and removing protective gloves:
1. Gloves will be inspected before use to ensure they are in good condition.
  2. Gloves are to be changed after one subject/inmate contact or procedure, and then replaced (unless there is no actual contact, such as when transporting).
  3. Insert hands into gloves and pull upward from cuff.
  4. Hands must be washed after removing gloves.
  5. Gloves that are torn or punctured will be removed and replaced immediately.
  6. Gloves will be discarded in proper waste receptacles.
- L. If protective eyewear is worn a mask should also be worn. Protective eyewear should be worn during:
1. Procedures likely to generate splashes, spraying, or splattering of blood or other body fluids.

2. Subject/inmate invasive search procedures likely to result in contact with blood or body fluids.
3. When dealing with any unknown substance that may contain chemical or toxic hazards.

M. Procedures for using protective eyewear include:

1. Obtaining approved eyewear from the appropriate area,
2. Washing hands before putting on eyewear,
3. Inspecting eyewear for defects,
4. Putting eyewear on face so ear pieces fit snugly behind ears,
5. Putting goggles (if used) over eyes and adjusting straps to fit snugly, and
6. Proceeding with caution.

N. When removing protective eyewear, the employee should:

1. Remove gloves,
2. Remove eyewear as soon as possible,
3. If eyewear is non-disposable, wear clean gloves and clean with soap and water,
4. If eyewear is disposable, immediately dispose of in proper waste container, and
5. Wash hands.

O. Protective masks are to be worn:

1. During procedures likely to generate droplets of blood or other body fluids.
2. For all invasive inmate procedures.
3. When dealing with any unknown substance that may contain chemical or toxic hazards.

**NOTE:** Masks are to be worn for only one patient/inmate contact or procedure at a time, and then discarded.

P. Procedures for donning a mask:

1. Wash hands before handling the mask,
2. Adjust the mask to fit snugly over the nose and mouth, and
3. During a procedure, masks should be changed periodically.

Q. Procedures for removing a mask:

1. Untie the mask,
2. Place the mask into the proper waste disposal container, and
3. Wash hands immediately.

R. Protective gowns will be worn during:

1. Procedures likely to generate splashes of blood or body fluid,
2. Invasive (search) procedures likely to result in contact with blood or other body fluids, and
3. When dealing with any unknown substance that may contain chemical or toxic hazards.

S. Procedures for the wearing and removal of protective gowns include:

1. Slide arms into sleeves and adjust gown for proper fit.

2. Tie strings in “shoelace” bow to ensure easy removal (do not use knots).
  3. Gowns are to be used for no more than one time and then discarded.
  4. To remove: with the right hand, firmly grasp left wrist area of glove and gown simultaneously.
  5. Withdraw left hand, sliding entire arm out gown back (glove will remain inside left sleeve).
  6. Reach behind with left hand and untie the tie-strings.
  7. With left hand, firmly grasp inside right front shoulder of gown and remove, turning right sleeve inside-out to the wrist.
  8. With the left hand, firmly grasp inside wrists area of both gown and glove simultaneously and remove right hand, turning right-hand glove inside out.
  9. After removal of gown, wash hands immediately.
  10. Used equipment should be placed in a marked biohazard bag and disposed of.
  11. Disposable gowns will be used whenever possible.
- T. When transporting persons for any reason, precautions should be taken to minimize contamination risks from airborne pathogens (tuberculosis, meningitis, etc.). Examples of such precautions include:
1. Opening at least one of the vehicle’s windows, and
  2. Switching the air conditioner to the setting that allows fresh air to flow into the vehicle (as opposed to re-circulated air).

***XII. DEPLOYMENT AND USE:***

- A. The use of PPE is required under the following circumstances:
1. Incidents at known or suspected clandestine drugs labs.
  2. Incidents of known or suspected chemical storage facilities.
  3. Events involving known or suspected chemical, nuclear or biological threats.
  4. Environments where exposure to any inhalation hazard is possible.
  5. Events where oxygen deprived environments may be a consideration.
  6. Encounters with persons known or suspected of having a communicable disease.
  7. Encounter with a person accompanied by or the potential for the presence of bodily fluids.

**Note:** It is not recommended to utilize air purifying respirators in a smoke filled environment. If there is a fire an air purifying respirator cannot add oxygen in a low oxygen environment, and there is a risk of suffocation. Additionally, smoke particles can clog a filter and do not protect against carbon monoxide or other gasses present in a fire.

- B. Determination of Required PPE Level:

1. The first responders on a scene will make every effort to identify the known or suspected hazards that are occurring or are likely to occur. Reference is made to the General Order 19, Incident Command System and Mobilization Plan regarding threat assessment.
  2. In the event of an actual or suspected WMD incident, if a qualified Hazardous Material Technician is not yet present to determine the required level of protection, first responders should treat the incident as immediately dangerous to life or health (IDLH) until advised otherwise.
  3. During routine encounters with individuals exhibiting signs of a communicable disease or the presence of bodily fluids, members are encouraged to use the highest level of PPE available and common universal precautions to avoid exposure.
- C. Required PPE when dealing with unknown substance that may potentially contain chemical or toxic substances, specifically synthetic opioids:
1. Synthetic opioids may be standalone or mixed with opioids such as Heroin, and come in powder, tablets, blotter papers and spray. Dermal absorption or inhalation of synthetic opioids could be deadly, so it is important to wear proper PPE to manage risks. All unknown substances should be treated as if they contain synthetic opioids. **First responders must recognize the dangers and take preventive measures to keep themselves safe while performing their duties. Prior to making the determination to field test, the deputy will take into consideration the necessity, based upon the need at the time, to charge the person with the contraband, the environment or location in which field testing would take place, and risk factors to include secondary exposure.** Small quantities, if field tested, should be conducted using disposable PPE, to include an N95 respirator, gown, shoe covers, eye protection and double powder free Nitrile gloves. If deemed necessary, larger quantities, if field tested, should be conducted by employees issued a half or full face respirator, gown, shoe covers, eye protection and double powder free Nitrile gloves. If the quantity of substance may cause a significant risk of exposure, the on-call CCIB agent and/or the Seminole County Fire Department's Hazardous Material Team should be contacted to provide guidance.
  2. A higher level of PPE is appropriate when dealing with larger quantities of suspected opioids. In the event of a spill or clandestine lab, first responders should vacate the area and request the Seminole County Fire Department's Hazardous Materials Team. They will also be requested prior to the execution of any search warrant.
  3. Work using the buddy system and make sure that one unit present has Naloxone/Narcan when handling any unknown substances suspected of containing opioids or synthetic opioids. In the event of exposure, call EMS immediately. Opioid adverse side effects include disorientation, coughing, sedation, respiratory distress or cardiac arrest, within minutes of exposure. Immediately administering Naloxone/Narcan can reverse an overdose, although multiple doses may be needed.
  4. Open cuts need to be covered. Employees should do a self-assessment prior to entering a scene or handling unknown substances suspected of containing chemical or toxic hazards.
  5. After the removal and/or disposal of PPE gear, immediately wash hands with soap and water. Do not utilize hand sanitizer.

**XIII. POTENTIAL USES OF PPE ENSEMBLES IN A WEAPONS OF MASS DESTRUCTION (WMD) OR OTHER INCIDENT:**

PPE Ensemble/equipment OSHA	Possible Unit to Use	Possible Task
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Level		
A, B, C (SCBA, PAPR)	Hazardous Device Team, Special Weapons & Tactics Team, C.C.I.B.	Incident containment, sampling of substance, render subject or Improvised Explosive Device safe, clandestine lab
C	Forensic Services	Evidence Collection
B, C (SCBA, PAPR)	Critical Incident Response Team Drivers	Transport into Warm & Hot Zones
B, C (SCBA, PAPR)	Specialized Response Teams	Security, Evacuation, Quarantine, Arrest & Detention
C, D (SCBA, EEBD)	Judicial, Corrections	Security, Escape, Evacuation
SCUBA	Underwater Search and Rescue Team	Evidence recovery

1. During WMD incidents, before deploying with PPE, if practical, the on-scene Specialized Response Team Supervisor will consult with a Seminole County Public Safety Hazardous Materials Technician to determine the need for personal protective equipment. Prior approval from a supervisor or consultation with public safety is not required in order to deploy PPE equipment. Certified and trained personnel may deploy if the warning signs of a contaminated environment are present. Emergency rescue and decontamination procedures will also be addressed at this time, if applicable.
2. When deploying personnel into suspected hazardous environments, Specialized Response Team Supervisors will make all attempts to comply with OSHA Regulation 1910.120 requiring a “buddy system” deployment with provisions for rescue as follows:
  - a. Employees will be organized into work groups in such a manner that each employee is designated to be observed by at least one other employee in the group. The purpose of the “buddy system” is to provide rapid assistance in the event of an emergency. Backup personnel will stand by with equipment ready to provide assistance or rescue.
  - b. Operations in hazardous areas will be performed using the “buddy system” in groups of two or more. Advanced first aid support personnel, as a minimum, will also stand-by with medical equipment and transportation capability. For purposes of Special Weapons and Tactics Team and Hazardous Device Team operations, this will include Seminole County Public Safety Hazardous Materials personnel to include appropriate advanced life support personnel being readily available.
  - c. It is the responsibility of the Incident Commander to assign personnel to two member teams in order to comply with the above Paragraphs 1 and 2. All personnel must be assigned a partner before deploying with PPE.

**XIV. GENERAL HOUSEKEEPING:**

- A. Work areas within Sheriff’s Office facilities will be maintained in clean and sanitary conditions.
- B. Employees are responsible for ensuring their work areas do not contain any known hazardous materials unless such materials are purposely stored there. When known hazardous chemical materials must be stored in the workplace, Safety Data Sheets (SDS) will be located in a central area for access by employees and first responders.

- C. Cleaning of such areas, especially after being contaminated with blood, chemical or other potentially infectious or caustic materials, ensures a safe working environment. Based on the contamination, work areas will be decontaminated with bleach and water, a professional decontaminant, or other appropriate disinfectant or cleaner. If contamination is due to a chemical hazard which continues to present an IDLH environment, the Seminole County Fire Department's Hazardous Materials Team will be summoned.
- D. Bins, cans, pails and containers intended for reuse, which have potential to become contaminated, will be routinely decontaminated and immediately decontaminated after any known contamination.

**XV. REGULATED (BIOHAZARD) WASTE:**

**A. General Procedures:**

- 1. Regulated contaminated waste will be placed in leak proof containers that are appropriately labeled or color coded and closed before removal. If outside contamination of a regulated waste container occurs, it will be placed in a second leak proof container that is appropriately labeled or color coded and closed. Disposal of regulated waste will be in accordance with all federal, state and local regulations.
- 2. Disposal of powder free Nitrile gloves, clothing and other items that have not been contaminated can be discarded as normal waste.
- 3. Contaminated protective apparel and products should be carefully placed into a biohazard waste bag immediately upon removal. Extreme care should be taken to ensure that the outside of the waste bag is not contaminated. A knot should be securely tied in the uppermost portion of the bag for closure.
- 4. All contaminated material, with the exception of "sharps" (needles, broken glass, knives, etc.), must be placed in plastic bags, sealed, and marked "BIOHAZARD."
- 5. Clothing items, disposable N95 masks, gloves, eye protection, paper coveralls and shoe coverings contaminated with any unknown substance suspected of containing chemical or toxic hazards will be placed in red bags and disposed of at local fire stations, the Forensic Services bulk evidence drop off area, or in the sally port at the JEPCF immediately after clearing scene. Under no circumstance will red bags be left in the backseat or trunk of vehicle.
- 6. Air purifying respirators and other non-disposable equipment will be properly cleaned with an agency approved decontamination solution if there is no evidence of contamination. P100 cartridges will be disposed of after use. CN, CS and CBRN cartridges will be evaluated for reuse. If there is no evidence of exterior contamination, the intake will be sealed and the cartridge decontaminated with an approved cleaner. Contaminated equipment that still poses an IDLH environment will be sealed in a red bag and the PPE Program Coordinator or the Seminole County Fire Department's Hazardous Materials Team will be consulted prior to decontamination and evaluation for reuse.

**B. Sharps (Special Considerations):**

- 1. *General:*  
Contaminated sharps will be discarded immediately in containers that are closeable, puncture resistant, leak proof and appropriately labeled or color-coded. Containers will be easily accessible to employees in areas where sharps are used. Containers will be kept in an upright position, replaced routinely and not allowed to overfill. Containers of contaminated sharps

being moved will be closed and, if leakage is likely, placed in a secondary, leak proof, appropriately labeled or color coded container. Reusable containers will not be opened, emptied or cleaned by hand.

2. *Department of Corrections:*

- a. Sharps (including used needles) are discarded in a rigid, puncture resistant container designed for such use. It is prohibited to:
  - (1) Recap contaminated needles,
  - (2) Remove needles from syringes by hand, and
  - (3) Bend, shear or break contaminated needles.
- b. All sharps will be immediately disposed of in a sharps and needle container that is kept locked and located in designated areas.
- c. A private vendor contracted by the Sheriff's Office picks up and disposes of sharps, needle containers and other biohazard materials.

3. *Seminole Neighborhood Policing:*

- a. Approved hardened containers will be used for sharps placed into evidence. Containers will be placed in an evidence bag with a biohazard label attached.
- b. Biohazard materials may be given to on-scene EMS personnel for disposal. If EMS personnel are not present, biohazard materials may be placed into a biohazard bag and taken to any fire station where it can be given to EMS personnel for disposal.
- c. If biohazard evidence is to be destroyed, it will be placed into a biohazard container and transported by Forensic Services to a contracted private vendor for destruction.

**XVI. CONTAMINATED LAUNDRY, UNIFORMS AND PERSONAL CLOTHING:**

- A. Universal precautions will be used when handling soiled laundry. It will be handled as little as possible with minimum agitation and bagged or containerized where used or found. Soiled laundry will be placed and transported in appropriately labeled or color coded, leak proof bags or containers.
- B. Uniforms and other clothing that cannot be decontaminated will be treated as biohazardous waste and disposed of properly. Disposal locations are contained within the sally port of the JEPCF, the Forensic Services evidence packaging area, or at any Seminole County Fire Station. Supervisors will be notified when uniforms are disposed of.
- C. For blood borne or biohazardous contaminations, uniforms and other clothing will be decontaminated by thoroughly immersing them in a solution of one-part bleach to 10-parts water and soaking for 30 minutes. If the use of bleach may damage the garment, an effective disinfectant must be used. After decontamination, the garments should be washed or dry cleaned, as necessary.
- D. Employees handling contaminated laundry will wear appropriate personal protective equipment.
- E. When shipping contaminated laundry to a facility that does not practice universal precautions, laundry containers will be appropriately labeled or color-coded. Specific laundry carts will be designated to move soiled laundry and will be decontaminated after each use.

**XVII. PERSONAL PROTECTIVE EQUIPMENT PROGRAM:**

**A. Program Coordinator:**

The PPE Program Coordinator is selected and reports to the Captain of the Special Services Division and the Director of Human Resources (or higher authority). The position requires an adequate level of training in regards to equipment used by the Sheriff's Office. Training should meet OSHA 29 CFR 1910.120 Operational Level Responder. The PPE Program Coordinator is responsible for recommending equipment selection and policy development, training, record keeping, identification and evaluation of hazards, medical evaluation and surveillance, fit-testing and user compliance.

**B. The Role of Supervisors and Employees:**

1. Supervisors are responsible for ensuring their employees have received a medical evaluation prior to fit-testing. Employees using Level A, B, C PPE will fit test and train on PPE annually. Supervisors will also inspect employees' issued PPE equipment semi-annually and assist them in the replacement of worn, damaged or missing components. During actual or threatened hazardous materials incidents, Supervisors will ensure employees use PPE equipment in accordance with training.
2. Employees will maintain and clean their issued PPE consistent with training and inform their Supervisor if any component is not properly functioning. Employees must also notify their Supervisor of any significant change in their health or body size/shape that would prevent them from using PPE or require a size exchange and subsequent fit-test.

**C. Medical Surveillance:**

1. Applicants for positions that are determined to be at risk, and who might be required to wear a full-face cartridge Air Purifying Respirator (APR) are required to fill out a medical surveillance questionnaire. Medical questionnaires are confidential and are reviewed only by a licensed health care professional prior to fit testing. If the questionnaire is approved, the employee will be issued the appropriate personal protection equipment and scheduled for training. If the employee is referred to a physician as a result of the health care professional's review, the employee will submit to a pulmonary function test and personal consultation with the physician.
2. Failure to receive medical approval will prevent the employee from being specifically deployed to any incident involving hazardous materials or weapons of mass destruction (WMD) that would require use of the equipment. In those instances, the employee will be issued a PPE for escape purposes only.
3. The agency, at its discretion, may provide certified PPE users with optical inserts for their assigned Air Purifying Respirator and/or Self Contained Breathing Apparatus (SCBA), Self-Contained Underwater Breathing Apparatus (SCUBA). Prescription optical inserts will only be provided if the employee needs them to specifically perform their assigned job function (i.e. firing a weapon).

**D. Fit Testing:**

1. Employees using a full or half face Air Purifying Respirator or Powered Air Purifying Respirator will be fit tested using at least a qualitative method determined by the PPE Program Coordinator. Employees using a Self-Contained Breathing Apparatus or Self Contained Underwater Breathing Apparatus will be fit-tested using a quantitative testing device determined by the Coordinator. Any employee using a disposable paper mask or

Emergency Escape Breathing Device (EEBD) is not required to submit to a fit-test.

2. N-95 respirator masks require fit testing. At a minimum, manufacturer recommended fit testing can be performed by each individual performing a user seal check prior to entering a contaminated area. After the respirator is placed over nose, straps should be adjusted until respirator fits comfortably around nose and chin. Cover the front of respirator by cupping both hands. INHALE SHARPLY. A negative pressure should be felt inside respirator. If any leakage is detected at the edges, adjust straps by pulling tighter or use a smaller mask. Repeat until sealed properly.
3. Supervisors of employees issued a full or half face Air Purifying Respirator or Powered Air Purifying Respirators are responsible to understand and enforce OSHA standard 29 CFR 1910.34.
  - a. The Respiratory Protection standard, paragraph 29 CFR 1910.134(g)(1)(i)(A), states that respirators shall not be worn when facial hair comes between the sealing surface of the facepiece and the face or that interferes with valve function. Facial hair is allowed as long as it does not protrude under the respirator seal or extend far enough to interfere with the device's valve function. Short mustaches, sideburns, and small goatees that are neatly trimmed so that no hair compromises the seal of the respirator usually do not present a hazard.
  - b. Loose fitting powered air-purifying respirators and hooded powered air-purifying respirators do not require a face seal, and thus, usually can be worn with facial hair.

#### ***XVIII. RECORD KEEPING:***

Medical and training records of each employee with risk of occupational exposure are maintained in accordance with the records retention schedule established by the Bureau of Archives. Medical and training records will be made available upon request to the Assistant Secretary of Labor for Occupational Safety and Health, the Director of the National Institute for Occupational Safety and Health, U.S. Department of Health and Human Resources or their representatives.

#### ***XIX. EQUIPMENT***

- A. The PPE Program Coordinator and the Director of the Inmate Medical Division will be directly responsible for ordering, stocking and supplying the listed PPE equipment to ensure equipment is standardized throughout the agency. The Director of the Inmate Medical Division will supply nurses and healthcare providers industry standard PPE equipment. Division Captains and Directors will work with the PPE Program Coordinator to supply all other areas of the agency based on assignment:
  1. Powder free Nitrile gloves, 5 mil
  2. N-95 respirator masks
  3. Gown and shoe covers
  4. Biohazard bags
  5. Eye protection
  6. Full or half face cartridge-type air purifying respirators
  7. P100 Cartridges
  8. CN, CS, CBRN Cartridges
  9. Powered Air Purifying Respirators
  10. Decontamination Solution
- B. Each division will be responsible for providing antiseptic hand cleaner to employees.

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- C. Fleet Services Division will be responsible for providing in each Sheriff's Office vehicle:
  - 1. First aid kit
  - 2. Emergency blanket
  
- D. The Special Services Division Captain will be responsible for approving the use of, procuring and issuing :
  - 1. Level A, B or C protective garments
  - 2. Dry suits
  - 3. Self-Contained Breathing Apparatus
  - 4. Self-Contained Underwater Breathing Apparatus
  
- E. At the completion of CPR training, the Professional Development Section will provide each trained employee a CPR mask.
  
- F. The Forensic Laboratory Services Division will be responsible for issuing proper "Biohazard" and "Chemical Hazard" labels.