



<b>INFECTIOUS DISEASES</b>		
<b>new:</b> ✓ rescinds: 3.1 ✓ amends: all previous		<b>cross-reference:</b>  <b>accreditation standards:</b> NYSLEAP Standard(s): 3.1
<b>effective date:</b> October, 2016	<b>amend date:</b> June, 2024	

**I. PURPOSE:**

The purpose of this order is to establish clear and concise guidelines and procedures for members to follow to ensure the safest work environment possible to minimize potential exposure to bloodborne pathogens, communicable diseases, and/or other potentially infectious materials.

**II. POLICY:**

It is the responsibility of this office to ensure that its employees are able to perform their duties in a safe and effective manner. The safe performance of daily operations can be threatened by life-endangering communicable diseases. It shall be the policy of this office to provide employees with up-to-date training and information that will help minimize potential exposure while increasing employee understanding of the nature, risks, and routes of transmission of the diseases. This order is compliant with OSHA and Public Employee's Safety and Health (PEOSH) requirements. PESH requirements are found in 12NYCRR Parts 800-830.

**III. DEFINITIONS:**

*Airborne:* When infectious agents can be carried by dust or droplet nuclei suspended in air and transmitted to new hosts. Airborne particles can settle on surfaces but can also be easily moved by wind currents and can be blown over great distances. This is in contrast to droplet spread where the droplets are too heavy to maintain in the air and quickly fall to the ground. Examples of airborne diseases include anthrax, chicken pox, and measles.

*Bacteria:* Single-celled microorganisms that can cause diseases and are treated with antibacterial medications. Some examples of diseases caused by bacteria include cholera, tuberculosis, syphilis, gonorrhea, and tetanus.

*Biohazardous Evidence:* Any evidence containing blood or body fluids, or any evidence stained or contaminated by blood or body fluids. All evidence of this type is presumed to be hazardous and will be handled accordingly.

*Bloodborne Pathogens:* Pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include but are not limited to: Hepatitis B virus (HBV) and Human Immune-deficiency Virus (HIV).

*Body Fluids:* Liquid secretions including blood, semen, vaginal or other secretions that might contain these fluids such as saliva, vomit, urine, or feces.

*Communicable Disease:* An illness caused by an infectious agent or its toxins that occurs through the direct or indirect transmission of the infectious agent or its products from an infected individual or via an animal, vector, or the inanimate environment to a susceptible animal or human host.

*Contaminated:* The presence or reasonably anticipated presence of blood or other potentially infectious material (OPIM) on an item or surface.

*Decontamination:* The use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles, and the surface of the item is rendered safe for handling, use, or disposal.

*Direct Transmission:* Transmission of an infectious agent to a host by direct contact (such as skin-to-skin contact, kissing, sexual intercourse) or via droplets.

*Droplets Spread:* The direct spread of an infectious agent through relatively large, short-range aerosols produced by sneezing, coughing, and talking. Spread can occur over a few feet, but droplets will quickly fall to the ground because they are too large to be carried on air particles. Examples of diseases transmitted by droplet spread include the common cold, the flu, measles, SARS, COVID-19, etc.

*Exposure Incident:* A specific eye, mouth, other mucous, non-intact skin, or potential contact with blood or other potentially infectious materials that result from the performance of an employee's duties.

*Incubation Period:* The time between exposure to a pathogen and the development of the first symptoms of a disease.

*Indirect Transmission:* Transmission of an infectious agent to a host through suspended air particles, inanimate objects (vehicles), or animate intermediaries (vectors).

*Infectious Waste:* Infectious Waste - Material soaked or saturated with blood, discarded serums and vaccines; pathological wastes, including human tissues and anatomical parts; laboratory wastes including animal carcasses which have been exposed to pathogenic organisms; wastes from patients in isolation, as well as other articles being discarded that are potentially infectious and that might cause punctures or cuts, including hypodermic needles, intravenous needles, and intravenous tubing with needles attached, pipettes, scalpels that have not been autoclaved or subjected to a similar decontamination technique and crushed or otherwise rendered incapable of causing puncture or cuts.

*Occupational Exposure:* Reasonably anticipated skin, eye, mucous membrane or parenteral contact with blood or other potentially infectious materials that results from the performance of a member's work duties.

*Other Potentially Infectious Materials (OPIM):* Bodily fluids, saliva, mucous, semen, vaginal secretions, cerebrospinal fluids, synovial fluids, pleural fluids, any bodily fluids which are visibly contaminated with blood, and all fluids in situations where it is difficult or impossible to differentiate the nature of the fluids.

*Pathogen:* A bacterium, virus, or other microorganism that can cause disease in its host.

*Personal Protective Equipment (PPE)* - Specialized clothing or equipment worn by an individual to protect from a hazard. It does not permit blood or other potentially infectious materials to pass through it or reach the employee/s work clothes, street clothes, under garments, skin, eyes, mouth, or other mucous membranes under normal conditions of use and for the duration of time during which the protective equipment will be used.

*Sharps:* Objects which can penetrate the skin, including, but not limited to, needles, knives, scalpels, broken glass.

*Source Individual:* Any individual living or dead whose blood or other potentially infectious materials may be a source of occupational exposure to the employee.

*Sterilize:* Use of a physical or chemical procedure to destroy all microbial life, including highly resistant bacterial endospore.

*Symptoms:* The combination of bodily expressions that indicate the existence of a disorder or disease.

*Universal Precautions:* An infectious-control method which requires employees to assume that all human blood and specified human body fluids are infectious for HIV, HBV and other blood borne pathogens and must be treated accordingly.

*Vehicles:* Inanimate objects that indirectly transmit infectious agents by carrying or providing a suitable environment for them. Examples include food, water, and biological fluids.

*Vectors:* Animate intermediaries between infectious agents and potential hosts. Some examples include flies, worms, mosquitoes, rats, bats, and ticks.

*Virus:* A non-living, infectious agent that can multiply in living host cells such as animal, plant, fungi, or bacteria cells. Some examples of diseases caused by viruses include smallpox, the flu, COVID-19, and hepatitis.

#### **IV. EXAMPLE COMMUNICABLE DISEASES**

Communicable diseases can be transmitted in many different ways. Below are descriptions of communicable diseases and their symptoms and mode of transmission:

*Acquired Immunodeficiency Syndrome (AIDS):* AIDS is caused by the advanced stages of infection of the human immunodeficiency virus (HIV). HIV destroys the cells in the immune system, allowing for secondary infections easier access to the body. This disease can be transmitted through unprotected sexual encounters and contaminated blood or breastmilk. Symptoms of HIV infection vary depending on the phase of virus infection; they can range from a fever to chills to joint pain and a variety of other symptoms.

An AIDS infection is usually characterized by sudden extreme weight loss, swollen glands, joint pain and ulcerated sores or lesions on the body. However, many infected persons may exhibit no immediate symptoms. Any person engaged in high-risk investigatory activities such as those dealing with drug abuse, prostitution, crime scenes where blood or other body fluids are present, serious accident investigation, or are involved in the collection, analysis, and storage of blood smeared and otherwise possibly contaminated evidence are at risk of being exposed to the AIDS virus. AIDS is a blood-borne disease transmitted by direct contact with blood, semen, and possibly other body secretions of an infected person. Sexual contact and intravenous drug abuse are the primary activities of transmission of the HIV virus. There is no evidence that the disease is transmitted through casual contact or through the air.

*Hepatitis A, B, & C:* Hepatitis is an inflammation of the liver. It can be caused by a number of substances and different types of viruses. Hepatitis A can spread from person to person or through contaminated food or water. Hepatitis B and C are examples of bloodborne diseases that can also be transmitted through other infected bodily fluids such as semen or saliva. Hepatitis B is more infectious and prevalent than AIDS. Its symptoms may include jaundice (yellowing of skin and eyes), vomiting, fever, and generally feeling weak. It can result in liver failure, liver damage, and liver cancer. Hepatitis C is contracted in a similar way but is more insidious, as chronic conditions like cirrhosis are more likely to develop. The individual may be unaware that they have hepatitis. It may be discovered as an incidental finding when liver function tests are checked. If this is not treated, it may result in long-term severe liver damage.

*Coronavirus Disease 2019 (COVID-19):* COVID-19 is a respiratory disease caused by a contagious virus known as SARS-CoV-2. This virus is part of a family of viruses known as coronaviruses that cause a range of respiratory illnesses such as the common cold, SARS, and MERS. Much like influenza, COVID-19 is thought to spread mainly by “person-to-person” contact via respiratory droplets. Common symptoms include fever, tiredness, dry cough, and difficulty breathing. The disease can lead to a variety of results ranging from mild symptoms to death.

*Cholera:* Cholera is an acute, diarrheal illness caused by the bacteria *Vibrio cholerae*. Symptoms are typically mild or nonexistent; however, when severe symptoms emerge, diarrhea, vomiting, and leg cramps can occur that may lead to dehydration and shock. This is an example of a communicable disease that is transmitted through vehicles such as contaminated water or food. While in the United States, cholera is very rare, other populations in countries with epidemic cholera such as Africa, Asia, or Latin America have greater chances of exposure to the bacteria.

*Malaria:* Malaria is a serious communicable disease caused by a parasite found in mosquitoes. Symptoms include high fevers, shaking chills, and flu-like illness. This is an

example of a disease that is bloodborne and transmitted indirectly by a vector (the mosquito). This bloodborne transmission mainly occurs when a mosquito bites an infected individual and later, when taking blood from another individual, injects a mix of the infected blood and saliva into a new person. The transmission can also occur through blood transfusions, organ transplants, shared contaminated needles or syringes, and potentially during childbirth. Malaria is most commonly seen in subSaharan Africa and South Asia.

*Tuberculous (TB):* TB is a communicable disease caused by a bacterium called *Mycobacterium tuberculosis*. The disease commonly targets the lungs but can attack any part of the human body. Symptoms can include a prolonged bad cough, chest pain, and coughing up blood. TB is an example of an airborne disease where the bacteria can be put into the air through coughing or speaking.

## V. PROCEDURES

### A. Communicable Disease Prevention

1. In order to minimize potential exposure to communicable diseases, officers shall assume that all persons could be potential carriers, even if no symptoms are visibly present.
2. Disposable gloves shall be worn when handling any persons, clothing, or equipment suspected of carrying a communicable disease that can be transmitted through contact, including through bodily fluids.
3. Masks, protective eyewear, and gown shall be worn where bodily fluids, droplets, or pathogens on surfaces may be splashed onto the officer.
  - a. In the case of transmission via droplets or airborne diseases, putting masks on prior to engagement with a contaminated person or area is advised.
4. Plastic mouthpieces or other authorized barrier resuscitation devices should be used whenever an officer performs CPR or respiratory resuscitation.
5. All sharp instruments such as knives, scalpels, and needles shall be handled with extraordinary care, and should be considered potentially infectious.
  - a. Gloves specifically designed to resist needle sticks, cuts, and abrasions shall be worn when searching for or handling sharp instruments. (Note: Standard leather gloves should not be worn. If they become contaminated, they must be disposed of in accordance with all applicable laws pertaining to the disposal of biohazardous waste.)
  - b. Officers should avoid placing their hands in areas where sharp instruments might be hidden. An initial visual search of the area shall be conducted, using a flashlight where necessary. The suspect may

also be asked to remove such objects from their person if deemed safe to do so by the officer.

- c. Needles shall not be recapped, bent, broken, removed from a disposable syringe, or otherwise manipulated by hand. Needles shall be placed in a puncture-resistant container when being collected for evidentiary or disposal purposes. Sharps containers are located in each patrol vehicle.
6. Officers shall not smoke, eat, drink, bite nails, or apply cosmetics near potentially contaminated areas or people.
7. Officers will take into custody blood or body fluid-stained property only when needed for evidence. All items of evidence contaminated with body fluids or blood will be placed into the red biohazard bags, one item per bag. The employee who bags this evidence shall be responsible for the completion of the Evidence Report and the necessary evidence tags.

Note: Evidence that needs to be dried must be clearly marked as needing such drying before being placed in the evidence locker. The officer assigned to the drying will remove the items from the evidence locker, take it to a designated area to be determined at the time depending on the size and quantity of the items to be dried and will ensure that the area has a leak-proof barrier underneath those items being dried.

8. Human bites are very serious. Because of the bacteria in the human mouth, there is a high risk of infection. Injuries obtained from teeth on the hand or fist are equivalent to human bites and can be potentially serious. The most important thing is to wash the wound with soap and water—then seek medical evaluation.
9. In the case of a communicable disease that is airborne or transmitted through droplets, limiting exposure to a suspected infected person(s) and their surrounding surfaces altogether unless absolutely necessary is highly recommended.
  - a. Using the dispatch center to screen individuals with applicable questions is one potential way to keep officers informed of the type of personal protective equipment (PPE) and amount of exposure that is considered safe.

## B. Transport and Custody

1. Depending on the particular situation, officer discretion may be used in arresting or otherwise physically handling any person who may have a communicable disease, taking into account the availability of PPE for the officer and the severity of the offense. Officers should consult with the supervisor when making such decisions.

2. In cases of suspected airborne diseases or diseases transmitted via droplets, suspect movement should be restricted. The number of officers in contact with the suspect should also be limited whenever possible.
3. Officers shall not put their fingers in or near any person's mouth.
4. Individuals that are potentially infected or have bodily fluids on their persons shall be transported in separate vehicles from other individuals after appropriate medical evaluation or treatment by paramedics or other qualified medical personnel. The individual shall be required to wear suitable protective covering if they are bleeding or emitting bodily fluids, where reasonable or possible.
5. Officers shall notify relevant support personnel during a transfer of custody when the suspect has bodily fluids present on their person.
6. Suspects taken into custody with a potential communicable disease or bodily fluids on their persons shall be placed alone on the designated holding bench for processing and should change into uncontaminated clothing. Where reasonable or possible, the deputy's room/holding area shall be posted with an Isolated Area—Do Not Enter sign.
7. In the case of transmission via droplets or airborne diseases, suspects should be provided masks (if possible) and instructed to follow proper hygiene etiquette such as coughing into elbows. Personnel might not need to wear a mask or respirator during transport if the patient is wearing a mask.
8. Officers shall document in the appropriate arrest or incident form when a suspect taken into custody has bodily fluids on their person.

#### C. Disinfection

1. Any unprotected skin surfaces that come into contact with bodily fluids or an infected individual shall be immediately and thoroughly washed with soap and warm water. Alcohol-based hand cleaning solutions or antiseptic towelettes shall be used where soap and water are unavailable.
  - a. Hand lotion can be applied after disinfection to prevent chapping and to seal cracks and cuts on the skin.
  - b. All open cuts and abrasions shall be covered with waterproof bandages before the employee reports for duty.
2. Employees shall remove clothing that has been contaminated with bodily fluids as soon as practical. Any skin area that has come into contact with this clothing shall then be cleansed in the prescribed fashion. Contaminated clothing shall be handled carefully and laundered separately.

Note: Contaminated clothing should not be laundered at home. The office shall make arrangements with the on-duty Corrections Sergeant to utilize the facility's commercial grade laundry machines, following their procedures in place for the cleaning of contaminated clothing. Grossly contaminated clothing shall be disposed of in accordance with all applicable laws pertaining to the disposal of biohazard waste. A *County Incident Report* shall be completed, and the clothing replaced at no cost to the officer.

3. Disinfection procedures shall be followed whenever bodily fluids are spilled, or an individual has bodily fluids on their person or is suspected of having a communicable disease is transported in an office vehicle.
  - a. A supervisor shall be notified, and the vehicle taken out of service.
  - b. Affected vehicles shall be designated by the posting of an Infectious Disease Contamination sign while awaiting decontamination.
  - c. The supervisor should consult with the Health Department and Facilities Department to determine the appropriate qualified individual to conduct the decontamination process.
  - d. If it is determined that Sheriff's Office personnel will decontaminate the vehicle, the vehicle shall be disinfected as follows:
    - All bodily fluids/organic matter shall be removed with an absorbent cloth before disinfectant is applied to the area.
    - The affected area should be cleansed with a hospital-grade disinfectant. Employees shall not hose or flood the affected area.
4. All disposable equipment, cleaning materials or evidence no longer needed and contaminated with body fluids shall be placed in red bio-hazard bags and disposed of in the bio-hazard box located in the jail nurse's office.

#### D. Supplies

1. Adequate infectious disease control and personal protective equipment (PPE) supplies shall be stored in the patrol vehicle "go bags." Protective gloves, disinfecting materials, and other first-aid supplies shall be made readily available at all times.
2. Supervisors are responsible to make sure each "go bag" is properly supplied with the communicable disease control and PPE supplies
3. Each "go bag" should be continuously stocked with the following communicable-disease control supplies:
  - First-Aid kit



- Clean gowns in appropriate sizes
  - Disposable gloves and gloves specifically designed to resist needle sticks, cuts, and abrasions
  - Barrier resuscitation equipment
  - Disposable towelettes or waterless disinfection solutions (70 percent isopropyl alcohol)
  - Red, infectious waste bags
  - Absorbent cleaning materials
4. Puncture-resistant containers and sealable plastic bags are located in each marked patrol vehicle.
  5. Masks appropriate for a variety of transmission methods such as air and droplet are individually assigned.
  6. Employees who use the supplies carried in police vehicles shall inform their supervisor so that they can ensure the supplies are replaced.
  7. Employees shall keep disposable gloves in their possession while on either motor or foot patrol.

E. Line-of-Duty Exposure to Communicable Diseases

1. Any employee who has been bitten by a person, stuck by a needle, or who has had direct physical contact with a potentially infected person or bodily fluids of an infected person, while in the line of duty, shall be considered to have been exposed.
2. A supervisor shall be contacted, and all appropriate *Employee Injury/Illness Form* shall be completed by the exposed officer and their supervisor.
3. If the incident is deemed an exposure, the officer shall follow the *Tompkins County Health Department Employee Bloodborne Pathogen (BBP) Post-Exposure Policy*.
4. Unless disclosure is authorized and necessary, all information regarding the officer's exposure shall remain confidential.
5. Any person responsible for potentially exposing an employee of the office to a communicable disease will be encouraged to undergo testing to determine if the source individual has a communicable disease.
6. Criminal charges may be sought against any person who intentionally acts to expose an employee to a communicable disease.
7. Employees who test positive for any bloodborne disease may continue on normal duty as long as they can maintain acceptable performance and do not

pose an additional safety and health threat to themselves, the public, or members of the office.

- a. The office shall make all decisions concerning the employee's work status, as related to the exposure, in coordination with the Tompkins County Human Resources Department and Public Health Department.
8. Employees who test positive for airborne or droplet-spread diseases must notify their supervisor and the county's Employee Leave Associate immediately.
  9. Employees who test positive for airborne or droplet-spread diseases should also consider taking the following actions to protect themselves and others:
    - a. Self-quarantining at home and not going out except for essential purposes.
    - b. If visiting a health professional, contact beforehand to determine proper health procedures.
    - c. Practicing good public health hygiene such as wearing an appropriate mask, covering their mouth using their elbow when coughing or sneezing, washing and sanitizing potentially contaminated or commonly used items, washing their hands, practicing social distancing, and ensure the cleaning products being used are sufficient to combat the communicable disease.

#### F. Reporting of Incidents

1. The supervisor shall assist the employee with completing the *Employee Injury/Illness Form* with as much information in *Appendix B* as known or available.
2. Upon notification, the Undersheriff shall notify the Personnel Department, TCHD Director of Community Health and the Health & Safety Coordinator.
3. The Public Health Department in coordination with the Health & Safety Coordinator will ensure the incident is recorded on the Office Injury and Illness form (OSHA 300 Log).
4. The incident will be kept confidential among the aforementioned parties and handled according to HIPPA and NYSDOH HIV standards.
5. The Public Health Department, in conjunction with the Health & Safety Coordinator is responsible for the coordination of infectious disease policy/procedures.

G. Record Keeping

1. The county shall maintain written records of all incidents involving employees who have been exposed to any communicable diseases while acting in the line of duty. The records will be stored in a secured area, with limited access, for the duration of the employee's employment plus thirty (30) years and maintained in conformance with applicable privacy laws.

H. Training

1. Training arrangements for the initial training and annual refresher training will be arranged through the TC Health Department.
2. The county's Risk & Compliance Administrator maintains the training records.

VI. **HEPATITIS B VACCINATION**

- A. In compliance with the TC Health Department's *Bloodborne Pathogen At-Risk Employee Education and Hepatitis B Vaccination Policy*, the Office's designated contact representative shall be the Jail Nurse.
- B. All employees identified as 'at-risk' shall be offered the Hepatitis B vaccination series free of charge within 10 working days of initial assignment.

Attachments:

A: *Employee Injury/Illness Form*

B: *County Incident Report*

C: *Tompkins County Health Department Employee Bloodborne Pathogen (BBP) Post-Exposure Policy.*

D: *Bloodborne Pathogen At-Risk Employee Education and Hepatitis B Vaccination Policy*

E: *Appendix A Medical Evaluation of a work-related BBP Exposure*

F: *Appendix B Information Required for BBP Incident Reports*

By Order Of



Derek Osborne  
Sheriff