I. PURPOSE
The purpose of this policy is to provide officers with guidelines for preventing the contraction of the AIDS virus.

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

III. DEFINITIONS
A. Bodily Fluids: Blood, semen and vaginal fluids or other secretions that might contain these fluids such as saliva, vomit, urine or feces.
B. Exposure Control Plan: A written plan developed by this agency and available to all employees that details the steps taken to eliminate or minimize exposure and evaluate the circumstances surrounding exposure incidents.
C. Personal Protective Equipment: Specialized clothing or equipment worn by members for protection against the hazards of contamination. This does not include standard issue uniforms and work clothes without special protective qualities.
D. Universal Precautions: Procedures promulgated by the Centers for Disease Control (CDC) that emphasize precautions based on the assumption that all blood and bodily fluids are potentially infectious of the AIDS (HIV) and hepatitis B (HBV) viruses.

IV. PROCEDURES
A. General Disease Prevention Guidelines
1. This agency’s exposure control plan shall provide the overall strategy for limiting exposure to HIV and HBV and responding to potential exposure incidents. The plan is available for review by all members through request of their immediate supervisor.
2. This agency subscribes to the principles and practices for prevention of HIV and HBV exposure as detailed in the “universal precautions” prescribed by the CDC and the federal regulations of the Occupational Safety and Health Administration (OSHA). Where otherwise not detailed in this policy, officers shall be guided by these practices and procedures.

B. Workplace Controls and Personal Protective Equipment
1. In order to minimize potential exposure, officers should assume that all persons are potential carriers of HIV or HBV.
2. When appropriate protective equipment is available, no member shall refuse to arrest or otherwise physically handle any person who may carry the HIV or HBV virus.
3. Members shall use protective gear under all appropriate circumstances unless the member can demonstrate that in a specific instance, its use would have prevented the effective delivery of health care or public safety services or would have imposed an increased hazard to his/her safety or the safety of another coworker.
4. Disposable gloves shall be worn when handling any persons, clothing or equipment with bodily fluids on them.
5. Masks in combination with eye protection devices, such as goggles or glasses with solid side shields or chin-length face shields, shall be worn whenever splashes, spray, spatter or droplets of potentially infectious materials may be generated and eye, nose or mouth contamination can be reasonably anticipated.
6. Gowns, aprons, lab coats, clinic jackets or other outer garments shall be worn as determined by the degree of exposure anticipated.
7. Plastic mouthpieces or other authorized barrier/resuscitation devices shall be used whenever an officer performs CPR or mouth-to-mouth resuscitation.
8. All sharp instruments such as knives, scalpels and needles shall be handled with extraordinary care and should be considered contaminated items.
   a. Leather gloves or their protective equivalent shall be worn when searching persons or places or dealing in environments, such as accident scenes, where sharp objects and bodily fluids may reasonably be encountered.
   b. Searches of automobiles or other places should be conducted using a flashlight, mirror or other devices where appropriate. Subsequent to a cautious frisk of outer garments, suspects should be required to empty their pockets or purses and to remove all sharp objects from their person.
   c. Needles shall not be recapped, bent, broken, removed from a disposable syringe or otherwise manipulated by hand.
   d. Needles shall be placed in departmentally provided, puncture-resistant, leak proof containers that are marked as biohazard when being collected for evidence, disposal or transportation purposes.
9. Officers shall not smoke, eat, drink, or apply makeup around bodily fluid spills.
10. Any evidence contaminated with bodily fluids shall be completely dried, double bagged and marked to identify potential or known communicable disease contamination.

C. Custody and Transportation of Prisoners
1. Where appropriate protective equipment is available, no office shall refuse to arrest or otherwise physically handle any person who may have a communicable disease.
2. Officers shall not put their fingers in or near any person’s mouth.
3. Individuals with body fluids on their persons shall be transported in separate vehicles from other individuals. The individual may be required to wear a suitable protective covering if he/she is bleeding or otherwise emitting body fluids.
4. Officers have an obligation to notify relevant support personnel during a transfer of custody when the suspect has body fluids present on his person, or has stated that he has a communicable disease.
5. Suspects taken into custody with body fluids on their persons shall be directly placed in the designated holding area for processing. The holding area shall be posted with an “Isolated Area – Do Not Enter.” sign.
6. Officers shall document on the appropriate arrest or incident form when a suspect taken into custody has body fluids on this person, or has stated that he has a communicable disease.

D. Housekeeping
1. Supervisors and their employees are responsible for the maintenance of a clean and sanitary workplace and shall conduct periodic inspections to ensure that these conditions are maintained.
2. All supervisory personnel shall determine and implement written schedules as appropriate for cleaning and decontamination based on the location within the facility or work environment, the type of surface or equipment to be cleaned, the type of soil present and the tasks and procedures to be performed in the area.
3. All equipment and environmental and work surfaces must be cleaned and decontaminated after contact with blood and other potentially infectious materials as provided for in this policy.
4. Any protective coverings used in laboratory, evidence custody or enforcement operations for covering surfaces or equipment shall be removed or replaced as soon as possible following actual or possible contamination.
5. Bins, pails and similar receptacles used to hold actual or potentially contaminated items shall be labeled as biohazard and decontaminated as soon as feasible following contamination, as well as inspected and decontaminated on a regularly scheduled basis.
6. Broken and potentially contaminated glassware, needles or other sharp instruments shall not be retrieved by hand but by other mechanical means and shall not be stored in a manner that requires that they be retrieved manually.
7. Officers shall remove clothing that has been contaminated with bodily fluids as soon as practical and with as little handling as possible. Any contacted skin areas shall be cleansed in the fashion prescribed.

8. Contaminated laundry and personal protective equipment shall be bagged or containerized at the location where it is used in departmentally approved leak-proof containers, but shall not be sorted, rinsed or cleaned at that location.

9. Departmental personnel working within this agency’s criminal laboratory shall adhere to policies and procedures contained herein but shall refer to and also adhere to special safety procedures established for the laboratory workplace.

10. Only employees specifically designated by the Chief of Police shall discard actual or potentially contaminated waste materials. All such disposal shall conform with established federal, state and local regulations.

E. Disinfection

1. Any unprotected skin surfaces that come into contact with body fluids shall be immediately and thoroughly washed with hot running water and soap for 15 seconds before rinsing and drying.
   a. Alcohol or antiseptic towelettes may be used where soap and water are unavailable.
   b. Disposable gloves should be rinsed before removal. The hands and forearms should then be washed.
   c. Hand lotion should be applied after disinfection to prevent chapping and to seal cracks and cuts in the skin.
   d. All open cuts and abrasions shall be covered with waterproof bandages before reporting for duty.

2. Officers should remove clothing that has been contaminated with body fluids as soon as practical. Any contacted skin area should then be cleansed in the prescribed fashion. Contaminated clothing should be handled carefully and laundered in the normal fashion.

3. Disinfection procedures shall be initiated whenever body fluids are spilled, or an individual with body fluids on his person is transported in a departmental vehicle.
   a. A supervisor shall be notified and the vehicle shall be taken to the service center as soon as possible.
   b. Affected vehicles shall be immediately designated by the posting of an “Infectious Disease Contamination” sign upon arrival at the service center and while awaiting disinfection.
   c. Service personnel shall remove any excess body fluids from the vehicle with absorbent cloth, paying special attention to any cracks, crevices or seams that may be holding excess fluid.
   d. The affected area should be disinfected using hot water and detergent or alcohol, and allowed to air dry.
   e. All police vehicles taken to a service center for scheduled washing and lubrication will routinely be cleaned in the interior with an approved disinfectant.
4. Non-disposable equipment and areas upon which body fluids have been spilled shall be disinfected as follows:
   a. Any excess of body fluids should first be wiped up with approved disposable absorbent materials.
   b. A freshly prepared solution of one part bleach to 10 parts water or a fungicidal/microbactericidal disinfectant shall be used to clean the area or equipment.

5. All disposable equipment, cleaning materials or evidence contaminated with body fluids shall be bagged and disposed of in compliance with state law provisions for disposal of biologically hazardous waste material.

F. Supplies
1. Supervisors are responsible for continuously maintaining an adequate supply of disease control supplies in convenient location for all affected personnel in their units. This includes, but is not limited to, ensuring that:
   a. personal protective equipment in appropriate sizes, quantities and locations are available.
   b. hypoallergenic gloves and other materials are available for those who are allergic to materials normally provided, and cleaning, laundering and disposal, as well as repair or replacement of these and other items is provided; and.
   c. first aid supplies and disinfecting materials are readily available at all times.

2. All departmental vehicles shall be continuously stocked with the following communicable disease control supplies:
   a. Clean coveralls in appropriate sizes;
   b. Disposable gloves and leather gloves;
   c. Puncture-resistant containers and sealable plastic bags;
   d. Barrier resuscitation equipment, goggles and masks;
   e. Liquid germicidal cleaner;
   f. Disposable towelettes (70% isopropyl alcohol);
   g. Waterproof bandages;
   h. Absorbent cleaning materials; and
   i. “Isolation Area – Do Not Enter” signs.

3. Officers using supplies stored in their vehicles are responsible for ensuring that supplies are replaced as soon as possible.

4. Officers are required to keep disposable gloves in their possession while on either motor or foot patrol.

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

3. In cases of exposure, a supervisor shall be contacted who shall complete appropriate duty injury and medical forms and shall take appropriate steps to document the means and circumstances under which the exposure occurred.

4. Immediately after exposure, the officer shall proceed to the designated health care facility for tests of evidence of infection and treatment of any injuries.
   a. This agency shall ensure continued testing of the member for evidence of infection and provide psychological counseling as determined necessary by the health care official.
   b. The member shall receive a copy of the health care provider’s written opinion within 15 days of the evaluation and information on any conditions resulting from the exposure that require further evaluation or treatment.
   c. Unless disclosure to an appropriate departmental official is authorized by the officer or by state law, the officer’s medical evaluation, test results and any follow-up procedures shall remain confidential.

5. Any person responsible for potentially exposing a member of this agency to a communicable disease shall be encouraged to undergo testing to determine if the person has a communicable disease.
   a. The person shall be provided with a copy of the test results and a copy shall be provided to the exposed agency member. The member shall be informed of applicable state laws and regulations concerning the disclosure of the identity and infectious status of the source individual.
   b. Criminal charges may be sought against any person who intentionally exposes a member of this agency to a communicable disease.

6. Officers who test positive for HIV or HBV may continue working as long as they maintain acceptable performance and do not pose a safety and health threat to themselves, the public or other members of this agency.
   a. This agency shall make all decisions concerning the employee’s work status solely on the medical opinions and advice of the agency’s health care officials.
   b. The agency may require an employee to be examined by the department health care officials to determine if he is able to perform his duties without hazard to himself or others.

7. All members of this agency shall treat employees who have contracted a communicable disease fairly, courteously and with dignity.
H. Record Keeping
1. This agency’s personnel function shall maintain an accurate record for each employee with occupational exposure that includes information on vaccination status; the results of all examinations, tests and follow-up procedures; the health care professional’s written opinion; and any other germane information provided by the health care professional.
2. These health care records shall be retained in a secured area with limited access for the duration of the member’s employment plus 30 years and may not be disclosed or reported without the express written consent of the member.

I. Training
1. This agency’s training coordinator shall ensure that all members of this agency with occupational exposure are provided with a complete course of instruction on prevention of blood borne diseases prior to their initial assignment.
2. All affected employees shall receive annual refresher training and additional training whenever job tasks or procedures are modified in a manner that may alter their risk of exposure.
3. All trainees shall have access to applicable federal and state regulations pertaining to the regulation of blood borne pathogens.
4. The training coordinator shall ensure that complete records are maintained on member training to include information on the dates and content of training sessions, names and qualifications of persons conducting the training and the names and job titles of all persons attending the training sessions. These records shall be maintained for a period of three years from the date of training.

ORDERED and EXECUTED this 15th day of April, 2013

Christopher Workman
Chief of Police