

	<b>ELGIN POLICE DEPARTMENT</b> 151 Douglas Avenue Elgin, Illinois 60120	
<b>Effective Date:</b> 01/01/03	<b>STANDARD OPERATING PROCEDURE</b>	<b>Revised Date:</b> 06/10/19
<b>Chief of Police:</b> 	<b>Blood Borne Pathogens and Infectious Disease, 101.1</b>	
<b>Cross Reference:</b>	<b>Policy Sections:</b> 101.1.1 Exposure Control Plan 101.1.2 Decontamination Disposal and Hazard Warnings 101.1.3 Detention Area, Prisoners & Property 101.1.4 Infectious Disease/Material Control 101.1.5 Post Exposure and Follow Up 101.1.6 Blood Borne Pathogen Training 101.1.7 Record Keeping	

## **PURPOSE**

The purpose of this policy is to establish guidelines to reduce on-the-job risks of contracting infectious or communicable diseases by clearly defining the Department's instructional and training objectives, in conjunction with the use of protective equipment and workplace engineering controls.

## **POLICY STATEMENT**

It is the policy of the Elgin Police Department to provide a safe working environment by complying with the Occupational Safety and Health Act (OSHA) relating to blood borne pathogens, potentially infectious material, or other communicable diseases.

## **DEFINITIONS**

**Blood Borne Pathogens:** Pathogenic micro-organisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, Hepatitis B (HBV), Hepatitis C (HBC) and Human Immunodeficiency Virus (HIV).

**Lead Jailer:** A member of the Department designated by the Chief of Police under the authority of the Jail Commander, who is responsible for the overall implementation and coordination of the Blood borne Pathogen Exposure Control Plan.

**Contamination:** The presence or reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.

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

**Exposure Incident:** Contact with a specific eye, mouth, nose, other mucous membrane, or non-intact skin in the performance of an employee's duties.

**Hepatitis B (HBV):** A viral infection that can result in jaundice, cirrhosis, and cancer of the liver. The virus may be found in human blood, urine, semen, cerebrospinal fluid, vaginal secretions, and saliva.

**HIV:** Human Immunodeficiency Virus- the virus that causes AIDS. Found in blood, semen, vaginal fluid, breast milk, cerebrospinal fluid, amniotic fluid, and any other body fluid that contains blood. It suppresses the body's immune system until it is unable to fight off certain infections and cancers that would not normally be seen in healthy persons. A person with *HIV* diagnosed with one of these host conditions is then considered to have *AIDS*, a life threatening illness.

**Parenteral:** Piercing the mucous membranes or the skin barrier through such events as needle sticks, human bites, cuts, and abrasions.

**Personal Protective Equipment (PPE):** Specialized equipment or clothing worn by an employee to reduce the risk of exposure to blood borne pathogens. General work clothes (e.g., uniforms, pants, shirts or blouses) not intended to function as protection against a hazard are not considered to be personal protective equipment.

**Potential Infectious Materials:** The following human body fluids shall be considered potential infectious material: semen, vaginal secretions, cerebrospinal fluid, synovial(body joint lubricant) fluid, pleural(chest membrane) fluid, pericardial(heart membrane) fluid, peritoneal(abdominal) fluid, amniotic(fetal) fluid, saliva, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids.

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

**Tuberculosis (TB):** An airborne bacterial disease that is spread by infected persons when they cough or sneeze and the airborne bacteria are breathed in by a nearby person.

**Universal Precautions:** An approach to infection control in which all human blood and certain body fluids are treated as if known to be infectious and/or contagious, including but not limited to HIV, HBV, and other blood born pathogens. Also known as *BSI*: Body Substance Isolation.

## **PROCEDURES**

### **101.1.1 EXPOSURE CONTROL PLAN**

- A. Exposure Control Classifications- The following Department members are reasonably anticipated to be exposed to blood or other infectious material:
  - 1. All sworn police officers
  - 2. All community service officers
  - 3. All maintenance personnel
  - 4. Any other employee that may serve as a matron.
- B. All personnel shall practice "Universal Precautions" as stated under "Definitions."
  - 1. Wherever possible protective gloves will be worn whenever the potential exists for contact with body fluids.
  - 2. Whenever any member's skin comes in contact with blood or other potentially infectious materials, the member shall immediately, or as soon as possible, wash his/her hands and any other exposed skin with soap and warm water, or flush mucous membranes with water or isotonic solution. When in the field, or otherwise when washing facilities are not available, members shall use antiseptic cleaners or towelettes until such time as they are able to wash the exposed area with soap and water.
  - 3. When wearing protective gloves, the gloves shall be carefully removed by pulling the gloves off at the cuff, taking care not to touch the exterior of the used glove. Upon removal the member shall wash hands using antiseptic soap and hot water if available or antiseptic wipes.
- C. Personal Protective Equipment (PPE).
  - 1. PPE shall consist of the following:
    - a. Disposable single use gloves
    - b. Face shields, goggles and masks

- c. Gowns/Jumpsuits
  - d. Surgical type caps / hoods / shoe covers
  - e. Bio-hazard bags / blankets
  - f. Antiseptic hand cleaner/ towelettes
  - g. CPR pocket masks (one way valve airway)
2. PPE's shall be available in all department vehicles, all workstations of members who may be exposed to blood borne pathogens and/or infectious disease, and the lockup and detention areas.
  3. PPE's shall be utilized as follows:
    - a. Disposable gloves shall be worn whenever it can be reasonably expected to have contact with blood or other infectious material, and when a member handles or touches potentially contaminated items or surfaces.
    - b. Face shields, masks and gowns shall be worn whenever splashes, spray, spatter, droplets of blood, or other contaminated materials may be generated, and eye, nose or mouth contamination can be reasonably expected. Safety goggles are an alternative to masks when only the eye area needs protection.
    - c. Surgical caps/hoods and shoe covers shall be worn in instances where gross contamination can reasonably be expected, such as autopsies or homicide scenes.
    - d. Cardiopulmonary resuscitation (CPR) pocket masks shall be worn by members when they perform CPR, to provide a physical barrier between victim and the member performing mouth-to-mouth resuscitation.
    - e. Personal protective (PPE) equipment shall be of a disposable type and not be reused or laundered.
  4. Personal protective equipment (PPE) shall be removed by department members and placed in a biohazard container prior to leaving the location of the incident where protective equipment use was required under the following guidelines:
    - a. Personal protective items shall be placed in labeled biohazard bags provided with each personal protective kit available in the detention facility.
    - b. The labeled biohazard bag shall then be placed in one of the biohazard containers located in the property/evidence area or in the detention facility.
    - c. Biohazard bags and containers shall be clearly marked with the bio hazard symbol in fluorescent red, orange or yellow.
    - d. The department shall dispose of all labeled biohazard waste in accordance with all state and OSHA requirements and regulations.
  5. Supervisory members shall ensure that personnel have available to them and use appropriate personal protective equipment.
- D. When a member declines to use personal protective equipment (PPE), because of professional judgment which, in the opinion of the member the use of such PPE would have prevented or delayed the delivery of health care or public safety services, and/or would have posed an

increased hazard to the safety of the department member or another, the circumstances shall be investigated and reviewed. A determination whether changes or practices be instituted to prevent such occurrences in the future shall be made. The Department member shall notify a supervisor and complete an appropriate report in such situations.

#### **101.1.2 DECONTAMINATION, DISPOSAL AND HAZARD WARNINGS**

##### **A. Work Site General Maintenance.**

1. Department members are expected to maintain assigned work areas in clean and sanitary conditions.
2. All work surfaces shall be cleaned and decontaminated with an appropriate disinfectant as soon as possible after coming into contact with blood or other potentially infectious material. Disinfectants used should be a broad spectrum germicidal / virucidal solution or a 10% bleach solution.
3. Receptacles used for disposing of blood or other potentially infectious material shall be inspected on a regular basis by custodial staff. Building custodial staff shall be notified for the cleaning and decontamination of any visibly contaminated receptacle as soon as possible. Containers, in addition to being labeled must also be:
  - a. Able to be closed.
  - b. Constructed to contain contents and prevent leakage of fluids during handling, storage, transport, or shipping.
  - c. Closed or sealed prior to removal to prevent spillage or protrusion of contents.
  - d. Placed in a second container should the original container become contaminated on the outside.
4. Contaminated needles and sharps shall be disposed of without shearing or breaking. These items shall be disposed of within puncture resistant, biohazard labeled containers, available in the property /evidence area or the lockup.

##### **B. Personal Protective Equipment (PPE) Collection & Disposal.**

1. Any PPE that has been contaminated MUST be placed in a biohazard bag for disposal. The PPE shall be secured in the bag and placed in the biohazard waste receptacle.
2. Any area containing biohazard receptacles must be in a restricted access area, such as property / evidence and the lockup, and must be clearly marked.

##### **C. Clothing/Department Members, Collection & Disposal.**

1. All personal garments that have been contaminated MUST be placed in a biohazard bag for decontamination (if the item is salvageable) or disposal (if the item is damaged beyond repair). Contaminated employee's clothing shall be placed in a biohazard bag and taken by the member to the city's contracted cleaners.
2. Clothing shall include but is not limited to:
  - a. Uniforms and clothing worn on duty, including undergarments, socks, shoes, and outerwear, whether supplied by the department or personally owned, which has been exposed to blood or other potentially infectious material while a member was performing his/her official duties.

- b. Contaminated laundry should be bagged as soon as possible or contained in the location where used, and handled as little as possible. When a member's uniform or clothing is exposed to blood or other potentially contaminated material, the member shall change clothes at the police facility. Clothing should be bagged in a biohazard bag, sealed and placed in another biohazard bag to prevent the leakage of fluids during transport. Under no circumstances shall a department member launder any clothing item, including uniforms that have been exposed to blood or other potentially infected material at their residence
      - c. Any department member handling contaminated laundry shall wear disposable protective gloves, at a minimum and additional PPE as dictated by the circumstances.
    - 3. Boots and leather gear may be brushed and scrubbed with soap and hot water by the officer wearing PPE.
  - D. All contaminated laundry shall be cleaned and decontaminated by the department at department expense, at an authorized cleaning facility. The approved facility shall be designated by the Office of the Chief of Police. Any item not salvageable shall be replaced at department expense.
  - E. Vehicle & Facility Contamination.
    - 1. When a department vehicle is contaminated by blood or other body fluids, the officer assigned the vehicle is responsible for:
      - a. Taking the vehicle out of service and securing it. The officer will notify Communications, who will notify a supervisor of the contamination.
      - b. Labeling the vehicle on both sides with a biohazard sign. These are available in the sally port or from the jailer.
    - 2. Police vehicles so contaminated shall remain out of service until cleaned and decontaminated by the approved contracted service, Elgin Car Wash.
    - 3. The watch commander or designee shall ensure that the vehicle is transported to the cleaning facility during normal business hours. The cleaning facility shall be notified of the extent of the contamination.
    - 4. The supervisor will send a department member to retrieve the vehicle once the decontamination is complete. The vehicle shall then be returned to service.
    - 5. When an area of the police facility is contaminated, the on scene officer is responsible for notifying the on-duty supervisor and Communications. The supervisor should ensure the contaminated area is placarded or otherwise restricted until cleaning and decontamination is done at the earliest possible time by building maintenance staff.
  - E. Hypodermic Needles & Syringes.
    - 1. Used or exposed hypodermic needles and syringes that are not sealed in their original packaging, with the guard in place over the needle, must be placed in a syringe container. Determined by the circumstances, they are put into evidence for follow up or destruction. There are needles / syringe containers in property / evidence packaging area.
    - 2. No hypodermic needle or syringe will be discarded into regular refuse containers. Used or exposed needles/syringes not being held for evidence will be placed in a needle syringe container and discarded in the biohazard sharps containers located in evidence or the lockup.

F. Handling and Storage of Property & Evidence.

1. Liquid samples may be collected as liquid and stored in secured, air-tight containers.
2. Tissue samples may be stored in secure air-tight containers.
3. Samples of clothing should be air dried prior to packaging. They must be air dried in a secure, restricted area marked with biohazard signs.
4. All contaminated property taken into custody should be labeled biohazard and in the proper biohazard bag or container and stored separately from other property.

**101.1.3 DETENTION AREA, PRISONERS & PROPERTY**

A. Contaminated Prisoners/Subjects.

1. Prisoners/Subjects with blood or other potentially infectious material present on their person shall be transported separately from other prisoners/subjects.
2. The prisoner/subject will be given an opportunity to clean themselves. This will include showers when necessary. Any contaminated clothing may be temporarily confiscated and temporary clothing supplied while in custody.
3. Members shall wear appropriate PPE and follow universal precautions any time a person is taken into custody or transported to the Department who has blood or potentially infectious material on his/her person.
4. Disposable blankets are available for use by prisoners with body fluid or blood spills. Non-disposable blankets that may have been contaminated must be placed in a biohazard bag, tagged with the contents and possible contaminant before being sent to the laundry facility.
5. Once a prisoner is placed in a detention cell or holding cell it shall not be used by another person until cleaned and decontaminated. If circumstances warrant a biohazard tag shall be placed on the cell window, the door locked and the cell placed out of service until building maintenance has decontaminated it.
6. All affected clothing and/or property will be placed in a marked biohazard bag. Officers inventorying property will use PPE as needed and afterwards clean contaminated areas. The biohazard bag will be placed in the individual locker in the prisoner property room.
7. Upon release or transfer, the prisoner must sign for the return of his/her property, which shall be returned in the original sealed bag. Any contaminated personal property left unclaimed will be disposed of as previously outlined in this procedure.

B. Department members shall inform other support personnel (firefighters, paramedics etc.) of blood or infectious material spill or other risk factors. Whenever a change or transfer of custody takes place and the subject has blood or other potentially infectious material present on his/her person, when the subject has made voluntary statements or thru other means (such as notifications by family members, court ordered testing) department members reasonably believe a risk of contagious or infectious disease exists the receiving department or agency will be verbally notified.

C. Department members who have actual skin contact with blood or other potentially infectious material from a individual (Level II or III Exposure) shall notify a supervisor.

## **Levels of Exposure Definitions:**

**Level I** - contact limited to merely being in the presence of a person suspected of having a communicable disease.

Response - no special action required other than decontamination of effected PPE.

**Level II**-exposure of healthy, intact skin to the source individual's body fluids.

Response - Follow prescribed decontamination process. Complete report documenting exposure incident.

**Level III**- whenever there is contact with infected blood or body fluids through open wounds, mucous membranes, or parenteral routes: Needle stick injury, blood or potentially infected material makes contact with employee's mucous membrane of eye, nose, or mouth, blood or potentially infected materials in contact with non-intact skin, cuts with sharp instruments covered with blood or other potentially infectious materials, any injury sustained while cleaning contaminated equipment, bite wounds which pierce the skin.

Response - Immediate medical care- for those members who cannot be transported by police vehicle, EFD paramedics shall be called to transport the employee to a medical facility for follow up care.

- D. A memo or copy of report will be submitted via the department member's chain of command to the Office of the Chief of Police with the date, time, case number and facts in cases of Level II or III exposure. A copy shall be forwarded to the compliance officer who shall place a copy in the members file.
- E. No evaluation, follow up, or other subsequent cost shall be borne by a member who experiences a Level III exposure related to workman compensation.
- F. The Deputy of Operations or his designee after reviewing all department and medical reports, shall make the final determination as to what level of exposure the incident should be classified.

### **101.1.4 INFECTIOUS DISEASE/MATERIAL CONTROL**

- A. Personal Protection.
  - 1. Long fingernails or rings may compromise the structural integrity of disposable gloves.
  - 2. Prior to duty, department personnel with open wounds should cover these wounds with an impermeable bandage.
  - 3. Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in areas where there is a potential for exposure to potentially infectious materials. Food and drink shall not be stored in a refrigerator, freezer or cabinets where tissue or body fluid samples are stored.
- B. Members should be aware that specific persons, including pregnant women and persons taking certain prescribed medications, are more susceptible to infectious disease contamination. Members should consult with their personal physician if they have concerns with their exposure risk.
- C. Individual Members Responsibilities.
  - 1. Ensure that adequate supplies are available for use prior to their tour of duty, whether in a work area or department vehicle.

2. Replace supplies used during their tour of duty.
  3. Properly dispose of contaminated items as set forth in this order.
- D. Supervisor's Responsibilities.
- Ensure adequate supplies are available for line personnel. Inventory stores of PPE, contaminated item receptacles, needle syringe keepers, sign/labels and decontamination supplies and order as needed from the administrative aide.
- E. Lead Jailer's Responsibilities.
1. Ensure disposal of contaminated items in the Lockup thru the department contracted approved licensed medical waste handler.
  2. Inventory PPE and Biohazard supplies in the Lockup and order items as needed from the administrative aide.
- F. Hepatitis B Vaccinations.
1. Hepatitis B vaccinations shall be offered to all Sworn Officers and Community Service Officers, free of charge, upon appointment to the department. Members have the option to receive vaccinations or decline them.
  2. Any member who declines Hepatitis B vaccinations shall do so in writing, on the OSHA form or an approved department form.
  3. Any member who declines vaccination but at a later date decides to accept vaccination shall be provided with the vaccination at that time at department expense.
  4. If a booster dose of Hepatitis B vaccine is recommended at a later date, the department shall make the vaccination available to all members requiring booster doses.

#### **101.1.5 POST EXPOSURE AND FOLLOW UP**

- A. If a member of the department has a Level III exposure incident, the department shall immediately make available a confidential medical evaluation with a follow up procedure to include at least the following elements:
1. Documentation of route(s) of exposure, and the circumstances under which the exposure occurred.
  2. Identification and documentation of the source individual, unless the department can establish that identification is not feasible or prohibited by law.
- B. The department shall ensure the treating healthcare professional is given a copy if needed of the OSHA standard on Blood borne pathogens in all cases where the healthcare professional is evaluating a department member after an exposure incident. The department will also provide the following:
1. A description of the exposed member's duties as they relate to the exposure incident, and route of exposure and circumstances under which they occurred.
  2. Results of the source individual's blood testing, if available.
  3. All medical records relevant to the appropriate treatment of the member, including vaccination.
  4. After a post- exposure incident, the department will ensure the affected department



member obtain the following info from the healthcare professional:

- a. The results of the evaluation, which shall be provided to the affected department employee only.
- b. Any possible resulting medical conditions resulting from the exposure, and recommended further evaluation or/and treatment.
- c. All other findings or diagnoses shall remain confidential and may not be included in the written report.

D. The police department shall be responsible to ensure following guidelines are followed:

1. The source individual's blood shall be tested to determine HBV , HIV infection as soon as feasible after obtaining consent, however if consent is not obtained the department will contact the State's Attorney's office to request a court order before a judge to order testing, unless consent is not required by law.
2. When the source individual is already known to be infected with HBV or HIV, testing need not be repeated.
3. Results of the tests shall be made available to the exposed department member, who will be informed of all applicable laws and regulations.
4. Collection of blood from department members who may have been exposed to infectious blood shall be in accordance with all state and federal regulations.
5. Post-exposure treatment, counseling, and evaluation of any reported illness which is recommended by the treating healthcare professional.
6. The healthcare professional's written opinion for HBV vaccination and post-exposure follow-up must be limited to the following:
  - a. Whether vaccination is indicated for the employee and whether the employee has received the vaccination.
  - b. A statement that the employee has been informed of the results of the evaluation.
  - c. A statement that the employee has been told about any medical conditions resulting from exposure to blood or infectious material that require further evaluation or treatment.

#### **101.1.6 BLOOD BORNE PATHOGEN TRAINING**

The Department shall provide Blood Borne Pathogen Training to all new employees who may be at risk of exposure as part of their initial training. Annual refresher training shall be provided for all employees covered in this SOP. The Department shall provide additional training when changes in tasks or procedures affect the employee's occupational exposure or when notified of changes in the Blood Borne Pathogen Standard. This training may be limited to addressing the new exposure issues. Training Records shall be kept for a minimum of three years by the training division.

#### **101.1.7 RECORD KEEPING**

The City of Elgin shall establish and maintain an accurate record for each Department member with occupational exposure thru their Worker's Compensation Plan administrated by Human Resources and Purchasing. This record shall include:

- A. Name and social security number of the employee.
- B. A copy of the employee's hepatitis B vaccination status including dates and any relevant medical records, or a copy of their written declination of the hepatitis B vaccination.
- C. A copy of all results of examinations, medical testing, and follow up procedures as required by law.
- D. The employer's copy of the healthcare professional's written opinion and the copy of the information provided to the healthcare professional.
- E. These records are required to be kept confidential, not disclosed or reported without the employee's expressed written consent to any person within or without the workplace except as required by law.
- F. These records shall be maintained by the Human Resource Department for at least the duration of employment plus thirty (30) years.