

5.3 Infection Control Policy

I. POLICY

The Johnstown Police Department recognizes that communicable disease exposure is an occupational health hazard. Communicable disease transmission is possible through public contact. This department will provide a comprehensive infection control system that maximizes protection against communicable diseases for officers from the public that they serve.

II. PURPOSE

This policy provides officers with the understanding that some risk of contagious disease exposure exists and gives them the necessary guidelines as well as the Hepatitis B immunization and their own personal protective equipment needed for guarding against communicable diseases. This department recognizes the need for work restrictions based on infectious control concerns.

III. GENERAL INFORMATION

1. Hepatitis B Vaccination [HBV]: consists of injections given over a period of six months. In most cases the vaccine will offer cover for life, providing a certain level of immunity has been achieved. Occasionally however it may be necessary to undergo further vaccinations.
2. No vaccination currently exists to protect against Hepatitis C.
3. PPE: Personal Protective Equipment

IV. PROCEDURES

Emergency response often is unpredictable and uncontrollable. While blood is the single most important source of HIV and the Hepatitis B Virus infection in the workplace, in the field it is the safest to assume that all body fluids are infectious. A PPE will be chosen by the officer to provide barrier protection against all bodily fluids. No standard procedure can cover all situations. Common sense must be used, when in doubt select maximum rather than minimal protection. To regard all medical information as strictly confidential. No employees' health information will be released without the signed written consent of the officer.

5.3 continued

A. Personal Protective Equipment [PPE]

All PPE's listed below will be issued to all officers. Hand washing is the most important infection control procedure. Wash hands after handling all potentially infectious materials, when decontaminating equipment, use of the bathroom and before & after handling food.

Gloves

1. Disposable latex gloves will be worn with individuals with exposed blood, body fluids or other infectious material. All officers will carry disposable gloves.
2. Gloves will be replaced as soon as possible when soiled, torn, or punctured. Hands should be washed after glove removal.
 - a. Officers may carry a hand sanitation solution when hand washing may not be readily available.
3. Where possible, gloves should be changed between individuals in multiple casualty situations.
4. Gloves will be used for handling, cleaning or disinfecting potentially contaminated equipment.
5. Gloves will be used for handling all potentially contaminated evidence.
 - a. Blood, bodily fluids, etc.
 - b. Needles

Pocket Mask

1. Mouth-to-mouth resuscitation will be performed only as a last resort if no other equipment is available. All officers will be issued a pocket mask with one-way valves to minimize the need for mouth-to-mouth resuscitation.

Level B Suit

1. Will be used when a biohazard situation occurs.
2. May be used upon entering into a potentially infectious household or business.

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B. Post Exposure Protocol

1. Any employee exposed to potentially infectious material will immediately wash the exposed area with soap and water or saline wash if the eyes are involved.
2. All exposures to infectious or potentially infectious materials should be medically evaluated within the first two [2] hours of the exposure, as some prophylactic treatments are only effective if initiated within that time period.
3. The following events will be considered HIGH RISK exposures:
 - a. Needle stick injuries.
 - b. Breaks in the skin caused by potentially contaminated objects.
 - c. Splash of blood or other potentially infectious material onto eyes, mucous membranes or non-intact skin.
4. All HIGH RISK exposures will immediately be evaluated and a plan for prophylactic treatment initiated [as deemed appropriate], by a qualified medical doctor.
5. A request of an infectious disease determination as provided for in the Ryan White Act of 1990 can be made to the individual that is the source. Request the source individual to consent to test for HIV and the HBV [virus]. It WILL be made clear to the source individual that he/she has the right to refuse such testing under present regulations.
6. Pursuant to the Ryan White Act of 1990, medical treatment facilities will notify the department of any diagnosis of an airborne, transmissible disease the source individual may then have. The department will immediately notify the employee and arrange appropriate medical evaluations and follow-ups.
7. Any employee, officer or civilian having an occupational communicable disease exposure will immediately report the exposure to his/her supervisor. Needle stick injuries will be reported immediately.
8. The employee will fill out the appropriate exposure report forms at the soonest possible time after any exposure occurs, including, but not limited to:
 - a. Needle stick injuries.
 - b. Breaks in the skin caused by a potentially contaminated object.
 - c. Splash of blood or other potentially infectious material onto eyes, mucous membranes or non-intact skin.
9. The supervisor will forward the completed forms to the Captain of Police who will in turn forward to the appropriate agency on infectious diseases.

5.3 continued

C. Department & Equipment Exposure

1. Any area exposed with a potentially infectious material will be immediately taken out of service until properly decontaminated. This will include, but it is not limited to holding cells, cruisers, clothing and equipment.
 - a. A “Damaged Property” report must be filled out prior to any restitution of any officer’s equipment or clothing.
 - b. Captain of Police will receive all “Damaged Property” reports.
 - c. Any officer’s items that cannot be properly decontaminated will be replaced.
 - i. Restitution may fall on the source individual.

Effective Date:

Date: August 5, 2008

By Order Of:

Craig Foust
Chief Of Police