San Diego County Sheriff's Department Detention Services Bureau - Manual of Policies and Procedures

DATE: DECEMBER 27, 2018

NUMBER: M.36

SUBJECT: STANDARD (BLOOD AND BODY FLUID) PRECAUTIONS

RELATED SECTIONS: DSB M.37, M.41; SHERIFF'S DEPT. BLOOD BORNE

PATHOGENS EXPOSURE

PURPOSE

To protect the health and safety of employees in the presence of or suspected presence of infectious and/or communicable diseases and to provide information and training to employees who are at risk of coming into contact with blood borne pathogens requiring Standard Precautions during the performance of their duties.

POLICY

- I. The Sheriff's Department shall comply with federal and state statutes applicable to blood borne pathogens that the employees may be exposed to during the completion of certain work tasks.
- II. Operational activities will be performed following Standard Precautions specified in the Department's written Blood borne Pathogens Exposure Control Plan.

DEFINITIONS

- I. An exposure incident is defined as a specific situation whereby any amount of blood or body fluids are deposited on: damaged skin, mucous membranes (e.g., eyes, nasal, mouth, etc.) or by skin puncture (e.g. contaminated needle stick, etc.)
- II. Damaged skin is defined as an open wound or weakened skin where penetration of the contaminant may occur (i.e., abrasions, scratches, burns or other skin lesions).
- III. Blood borne Pathogens -Pathogenic microorganisms present in human blood that can cause disease.
- IV. Chemical Quaternary -is a chemical disinfectant that reduces disease by 99.9% when caused by germs and viruses including Staph. Strep, HIV, Hepatitis, Rotavirus, E-Coli, Salmonella and fungi. Its actions are Tuberculocidal, Virucidal, Bactericidal, and Fungicidal
- V. Communicable Disease -Any disease carried from one person or animal to another by direct or indirect contact.
- VI. Decontamination -The use of physical or chemical means to remove, inactivate, or destroy surface blood borne pathogens to the point where they are no longer capable of transmitting infectious particles and it is rendered safe for handling, use or disposal.
- VII. Hypoallergenic -Any material having little likelihood of causing an allergic response.
- VIII. Infectious Agent -An organism responsible for causing a disease.

IX. Standard Precautions -An infection control approach in which all human blood and certain body fluids are treated as if known to be infectious of HIV, Hepatitis B Virus, and other blood borne pathogens.

PROCEDURE

San Diego County Sheriff's Department assumes human blood and all body fluids are to be treated as if they are known to contain Human Immunodeficiency Virus, Hepatitis B virus and other blood borne pathogens. All SDSD employees shall employ Standard Precautions.

I. PRE-EXPOSURE

- A. Personnel are required to use Standard Precautions when at risk for potential exposure to blood or other body fluids.
- B. Hepatitis B vaccinations are recommended and available at no cost to employees who have potential occupational exposures.
- C. The medical/mental health information transfer summary (J-204 form) for inmates who are transferring to prison are to be placed inside the designated envelope (J-270 form) to inform transporting deputies to use universal and respiratory precautions as applicable. A copy of (J-270A form) will be attached to all transfer bags containing the medical records of inmates transferring to the other detention facilities within the system.
- D. An awareness-training program on Exposure Determination and Hazards will be provided to all SDSD employees to make them aware that:
 - 1. They may be exposed to blood borne pathogens during the performance of certain work assignments.
 - 2. Specific job-related duties place them at risk for exposures to potentially infectious materials.
 - 3. They must review safety information and safe work procedures specific to the duties they are performing and the type of pathogens to which they may be exposed.
 - 4. They are responsible to assess their health status (i.e., open wounds, etc.) before performing duties that could place them at risk of receiving an exposure to blood borne pathogens.

E. Exposure Control Plan

All Sheriff's Department detention facilities maintain a written Blood Borne Pathogens Exposure Control plan.

1. A copy of the Exposure Control Plan is available through the detention facility watch commander.

2. All employees shall review this policy and complete the training before handling blood and all body fluids.

II. EXPOSURE

- A. Methods of compliance with Standard Safety Procedures
 - 1. Personal Protective Equipment

Sheriff's facilities can consult the Employee Medical Liaison Unit for information on ordering appropriately approved personal protective equipment.

a. Disposable Gloves

The appropriate examination gloves shall be used. Hypoallergenic gloves, glove liners, powder less gloves or other similar protective gear are available to employees who are allergic latex. Employees who require such items should contact their supervisor or members of the Employee Medical Liaison Unit.

- 1) Gloves shall be worn whenever there is a risk of contact with blood, body fluids and mucous membranes of non-intact skin of inmates.
- 2) Protection can be increased by double gloving and should be considered when there is a large quantity of blood exposure.
- 3) If the glove is torn or punctured by a needle stick or accident, remove the damaged glove, wash hands and put on a new glove as promptly as inmate safety permits.
- 4) Remove potentially contaminated gloves immediately and before touching uncontaminated surfaces i.e. keyboards, telephones, door handles.
- 5) Gloves shall be removed by peeling them off "inside-out" to prevent any contaminated material from having contact with the skin. Used gloves and contaminated materials shall be disposed of in accordance with the Exposure Control Plan.
- b. Safety Glasses or Goggles

Eye protection is to be worn whenever there is a likelihood of blood splash, spray/or misting.

c. Masks

Protective Barrier Membrane (disposable one-way valve mask) is to be worn whenever there is likelihood of production of respiratory droplets, mists, splash or sprays.

- 1) Protective Barrier Membranes (disposable one-way valve mask) shall be used any time administering CPR.
- 2) Protective Barrier Membranes (disposable one-way valve masks) shall be used anytime mouth to mouth resuscitation is used.

d. Coveralls/Fluid Resistant Material

Coveralls, such as Proshield Tyvek, are to be worn over department uniforms when dealing with a significant amount of potentially infectious material.

e. Shoe/Boot Cover/Fluid Resistant Material

Boot covers, such as Tyvek Shoe Boot covers, are to be worn over shoes or boots when dealing with a significant amount of potentially infectious material.

f. Clothing

- 1) If an employee's clothing becomes contaminated with blood, body fluid or other potentially infectious materials, it should be carefully removed as soon as possible.
- 2) Care needs to be exercised that the clothing does not contaminate other articles before it is laundered.

2. Hand Washing

All staff hand washing stations will be supplied with antimicrobial hand cleaners. Sheriff's facilities can consult the Employee Medical Liaison Unit for information on ordering appropriate approved supplies.

- a. Body substances may contain organisms that easily contaminate your hands. Hand washing is an effective means of infection control. When properly done, hand washing removes infection organisms. Any handwashing product, whether antibacterial or antimicrobial will achieve this goal.
- b. Wash hands thoroughly before eating or preparing food; before and after touching wounds or other drainage; after contact with blood or body fluids; mucous membranes, secretions, or excretions (such as saliva, urine, blood, semen and feces).
- c. Waterless antimicrobial hand cleaners shall be used only where water is not available and may not be substituted for soap and running water in detention facilities except during an internal emergency.
- d. Do not use other chemicals such as alcohol or bleach to wash your hands. The chemicals may damage your skin and cause open sores or chapped areas to be more easily infected.

- e. Hands shall be washed immediately after gloves are removed.
- f. Hands and other skin surfaces shall be washed with soap and water immediately and thoroughly if contaminated by blood or body fluids.
- g. Non-intact Skin Surfaces
 - 1) Employees who have open wounds or breaks in the skin shall refrain from all direct handling of blood and body fluids until the condition resolves.
 - 2) Employees with open wounds or breaks in the skin shall thoroughly cover or bandage such wounds.
- h. Mucous membrane exposures, e.g., nose, eye, mouth, shall be washed with water only.
- i. Sharp Devices

All employees will take precautions to prevent injuries caused by needles, and other sharp instruments or devices.

3. Pregnant Staff

Pregnant staff members are not known to be at greater risk of contacting HIV infection than non-pregnant staff; however, the infant is at risk of infection resulting from prenatal transmission.

III. POST EXPOSURE

Cleaning and decontaminating spills of blood and other body fluids.

- A. Sworn staff are responsible for or ensuring all obviously contaminated surfaces are cleaned by an inmate worker(s).
 - 1. Chemical quaternary disinfectants that are health care facility approved, when used at recommended dilutions, can be used to decontaminate spills of blood and other body fluids.
 - 2. A solution of 1:10 bleach to water is effective in preventing transmission of HIV.
 - 3. The deputy in charge of trash detail shall ensure that all biomedical waste is placed in a locked dumpster/trash container.
- B. Cleaning of isolation, safety and holding cells, medical housing, restrooms, inmate telephones, prostraint chairs, handcuffs, leg shackles, waist chains and leg chains will be done routinely using health care facility approved disinfectants or bleach solution.

C. Laundry

- 1. Don gloves prior to handling soiled linen. Minimize agitation to prevent gross microbial contamination of the air and of persons handling the linen. All soiled linen should be bagged at the location where it was used.
- 2. Linen soiled with blood or body fluids shall be placed and transported in bags that prevent leakage.
- 3. Linen must be washed in conjunction with laundry services procedures.
- D. Facility medical staff may be used as a resource when needed for specific information regarding blood spill clean up. In extraordinary blood spills, medical staff will respond to assess the blood spill and give clean up instructions.

IV. REPORTING EXPOSURES

- A. All contamination shall be reported immediately to the employee's immediate supervisor to ensure appropriate documentation and medical treatment if:
 - 1. There is mucous membrane contamination, or
 - 2. The skin barrier has been or may have been penetrated.
- B. The exposed staff shall be referred to the nearest County contracted Industrial Medical Clinic for medical follow-up and medical treatment according to Department Policy and Procedure 3.16 -Occupational Injury.
- C. The employee's immediate supervisor shall report all contacts with potential or suspected sources of infectious disease by completing a form RM3, "Supervisor's Accident Investigation Report". Post exposure evaluation and follow-up shall be sought at the County-contract provider as soon as possible.
- D. The "Supervisor's Accident Investigation Report" (form RM3) shall be forwarded to the Sheriff's Medical Liaison Unit by the next business day after the occurrence along with the "Report of Occupational Injury (form MLU-4), which is filled out by the employee. The original forms shall be forwarded to the Sheriff's Medical Liaison Unit. The Medical Liaison Unit will maintain copies and forward the originals to the Workers' Compensation Division/Risk Management at the County Department of Human Resources.
- E. If a contact with a potential source results in infection or physical injury, the employee shall proceed to the nearest County-contract emergency workers' compensation medical facility for treatment. In addition to the forms above, the employee shall fill out the following forms:
 - 1. DWC-1 "Employees Claim for Worker's Compensation Benefits"
 - 2. MLU-1 "Status Report for Occupational Injury or Illness"

- 3. "Proof of Service"
- 4. Authorization to Obtain and Release Information in Connection with an Application for Worker's Compensation Benefits (Medical and Non-Medical releases).
- F. California State Law (7510 P.C.) requires law enforcement personnel to file a specific report form whenever they have had an exposure to a body fluid capable of transmitting HIV. The State Law further requires the Chief Medical Officer to complete a process of investigation and determination about HIV testing the source of the exposure.
- G. "Chief Medical Officer" means, in the case of a report filed against a subject who is an inmate of the county jail, or who has been arrested or taken into custody whether or not the person has been charged with a crime, but who is not in a correctional facility, the County Health Officer of the County of San Diego.
- H. When an inmate refuses or is not mentally competent to give voluntary consent, law provides consent for HIV testing of specific appeal rights.
- I. Whenever an exposure has occurred the exposure should be assessed and personnel should be referred for appropriate medical follow-up.
- J. Personnel are required by law to file a report whenever they have been exposed to body fluids capable of transmitting HIV of a detainee, arrestee, inmate, parolee, or probationer.
 - 1. Personnel will complete the State Department of Health Service Report of Request and Decision for HIV Testing form 5019, whenever they have been exposed to body fluids capable of transmitting HIV.
 - 2. Personnel may request HIV testing of the source of the exposure on the 5019-report form.
 - 3. The 5019 report form will be completed as soon as possible after the incident and no later than 24 hours following the incident.
 - 4. The 5019-form will be submitted to the Employee Medical Liaison Unit. Copies of the report shall be submitted to the facility commander.
 - 5. Pursuant to Penal Code 7511, the County Health Officer is required to decide if HIV testing of the source is appropriate and will indicate the decision on the 5019-report form.
 - 6. Pursuant to Penal Code 7511, the County Health Officer is required to return the completed 5019-form to the employee within 5 calender days after the submission of the form.
 - 7. Anytime an employee has not received the completed 5019-form within 5 days after submission of the form, the employee will notify the facility commander immediately.

- 8. The facility commander will contact the County Health Officer to determine the reason for the failure to return the form in the legally specified time frame. If the matter is not resolved, the facility commander will contact the Sheriff or the Sheriff's legal counsel.
- K. State law provides for an appeals process if either party disagrees with the decision of the County Health Officer regarding the HIV testing of the subject of the report.
 - 1. The employee who filed the 5019 report form or the subject of the test may appeal the decision of the County Health Officer.
 - 2. The deputy or subject of the test files the Report of Request of Appeal for HIV Testing, form 5019, within 3 calender days of the receipt of the decision of the County Health Officer.
 - a. The Appeals Panel is to be compromised of:
 - 1) County Health Officer
 - 2) Supervisory Representative of the Sheriff
 - 3) Independent Physician selected from a list developed by the State Department of Health Services
 - b. The appeals hearing is a closed hearing. Both parties can be represented and present evidence.
 - c. The decision of the Appeals Panel must be rendered within 10 days of the receipt of the appeals request.
 - d. The decision must be unanimous to overturn the initial decision.

V. EXPOSURE FOLLOW UP

Post-exposure medical evaluation and follow up shall be sought at the County contract provider as soon as possible at no cost.

VI. RECORD KEEPING

- A. Employee Medical Records
 - 1. The original Medical Records of employee with occupational exposures are maintained by the County Medical Standards and duplicate copies are maintained by the Sheriff's Departments' Employee Medical Liaison Unit.
 - 2. These medical records will be kept confidential and will not be disclosed without the employee's written consent to any person within or outside the workplace (except as may be required by law).
 - 3. These medical records may include:

- a. The name and social security number of the employee.
- b. A copy of the employee's Hepatitis B vaccination status, including the dates of all Hepatitis B vaccinations and any medical records related to the employee's ability to receive such vaccination.
- c. A copy of all results of examinations, medical testing and follow-up procedures.
- d. A copy of the health care professional's written opinion.
- e. A copy of the exposure information supplied to the health care professional.

B. Employee Training Records

Training records will be kept in accordance to the specific division/department protocol. The Blood Borne Pathogen Exposure plan-training files are to be maintained for at least three years from the date on which the training occurred. These records include the following:

- 1. The name and job title of the employee.
- 2. The dates and summary of the training session.
- 3. The names and qualification of all personnel conducting the training.