



Newport News Police Department - Administrative Manual

ADM-323 - COMMUNICABLE DISEASE/DRUG EXPOSURE CONTROL

Amends/Supersedes: ADM-323 (11/21/2016)

Date of Issue: 01/09/2019

I. DEFINITIONS

- A. *Communicable Disease* - An infectious disease capable of being passed to another by contact with an infected person or their body fluids.
- B. *Exposure Control Policy* - A written procedural plan which details steps taken to eliminate or minimize exposure incidents, outlines post-exposure follow-up, and identifies at-risk tasks and assignments.
- C. *Designated Officer* - Officer in charge of overseeing exposure control incidents, contact person on all exposure cases, and the Department's liaison during OSHA inspections. The officer handling the Department's Worker's Compensation cases is the designated officer.
- D. *Blood Borne Pathogen Kit* - Protective items or cleaning equipment used by employees for protection against infection.
- E. *Occupational Exposure* - A reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood, hazardous drugs, or other potentially infectious materials that may result from the performance of an employee's duties.
- F. *Exposure Incident (Communicable Disease)* - An event where an employee has had direct or indirect contact with blood or body fluids of another person. This can include exposure to airborne pathogens if an employee breathes in droplets that become airborne when an infected person coughs or sneezes (see Section III. B. 3. b. 1 and 2).
- G. *Exposure Incident (Hazardous Drugs)* - An event where an employee has had direct contact with fentanyl (or some other hazardous synthetic or natural drug) and the employee experiences effects from the substance requiring emergency medical assistance.
- H. *Hazardous Drugs* - As used in this policy, refers to natural or synthetic opioids, fentanyl, fentanyl analogues, and similar substances.
- I. *Source* - The person whose body fluids come in contact with an employee.
- J. *Infectious Disease Exposure Consultant* - Person designated by the City to assess communicable disease exposures, coordinate source testing, and provide counseling and/or initial treatment.
- K. *Alcohol Sting Test* - Subjecting infected area to rubbing alcohol in an attempt to identify small open wounds.

II. GENERAL

- A. The Occupational Safety and Health Administration (OSHA) in accordance with federal law enacted the Bloodborne Pathogens Standards. The policy establishes guidelines and procedures that must be followed during exposure incidents. The policy also establishes procedures for the proper handling of contaminated items, reporting a possible exposure, medical care and follow-up.
- B. The Designated Officer will be responsible for overseeing:
 - 1. The Department's bloodborne pathogen exposure control incidents and all necessary reports.
 - 2. Any hazardous drug exposure that results in employee hospitalization or death.
- C. Hepatitis B Virus (HBV) Vaccinations

The Department affords all employees who run the risk of occupational exposure to Hepatitis B the opportunity to take the HBV vaccination series at no cost to the employee. Employees who do not desire to take part in the vaccination program must sign a "Vaccination Declination Form" (available from the Designated Officer).

III. PROCEDURES

- A. Precautions
 - 1. Issued Protective Equipment [22.1.6; 41.3.4]
 - a. All precincts are issued Bloodborne Pathogens kits to be kept available with equipment available to police employees. Each kit consists of latex/nitrile disposable gloves, anti-microbial towelettes, and a biohazard disposal bag.
 - b. Hand sanitizer and gloves are available to officers.
 - 1) Employees should use hot water and soap as soon as possible following an exposure to bloodborne pathogens or communicable diseases, even if the waterless antiseptic cleanser is used. Following this cleaning, perform alcohol sting test.
 - 2) Employees will not use waterless antiseptic cleanser (or substances such as bleach or rubbing alcohol) if exposed to a hazardous drug, as this promotes absorption into the body. A thorough cleaning with soap and water will be conducted as soon as possible.
 - c. Employees who use a precinct's protective supplies shall arrange to have them replaced as part of their precinct's supplies through the Logistics Unit.
 - 2. Disposable Gloves
 - a. Whenever possible, employees shall wear disposable latex gloves when doing any of the following:
 - 1) Handling persons or items with any blood or body fluid, to include packaging such items for evidence.

- 2) Cleaning up blood or other body fluids on items and equipment such as handcuffs, shoes, clothing, seats, or pens.
 - 3) Conducting searches of persons and/or their property for narcotics.
- b. Employees shall wear disposable nitrile gloves (or issued equivalent) when handling substances suspected to be hazardous drugs.

3. Contact with People

- a. After contact with a subject who is bleeding or vomiting, an employee must remove his disposable gloves and wash his hands thoroughly with soap and water. If there are no washing facilities available, the employee will use their issued hand sanitizer. The employee will then wash their hands with soap and hot water as soon as possible.
- b. Employees shall not use any sink or washing facility used for food preparation when washing their hands after an exposure incident.
- c. Extreme caution should be used when searching prisoners or dealing with people in environments (e.g., accident scenes, drug searches) where sharp objects and body fluids may be reasonably encountered. Sharp objects should be pushed out of the suspect's pockets. An officer should not reach into an individual's pocket.
- d. Officers will transport only one prisoner when the prisoner is contaminated with blood or body fluids. [71.3.1]

4. Handling Contaminated Objects

- a. Employees must use extreme caution when handling any sharp object. Syringe needles will not be bent, recapped, or otherwise manipulated in any way. Objects (whether disposed of, or kept as evidence) shall be placed in safety containers provided by the Department and handled in accordance with OPS-485, "Property and Evidence".
- b. Objects contaminated with blood must be disposed of properly. They will be placed in biohazard bags and marked to identify them as potentially infectious materials.
- c. If an officer's uniform becomes soiled by blood or body fluids, it must be changed as soon as possible. Personnel should bring an extra uniform to work.

NOTE: See Section III. C. ("Clean Up and De-Contamination of an Exposure") for how to package and discard contaminated items.

- d. If an employee's clothing becomes exposed to hazardous drugs, the clothing should be discarded as soon as possible. (Section III.C.)

5. Precautions at Major Crime Scenes

- a. Employees should not eat, drink, or smoke while at a crime scene.
- b. Wear latex gloves (or their issued equivalent). Any employee with a cut, abrasion, or any other break in the skin on the hands should never handle blood, body fluids, or any evidence which may be contaminated without protection (i.e., latex gloves).
- c. Protective gloves should be changed when they become torn or heavily soiled. If the gloves are contaminated with blood or body fluids, they must be treated as a biohazardous material and disposed of accordingly.
- d. Hands should be washed after gloves are removed, even if the gloves appear to be intact.

- e. If cotton gloves are worn when working with items having potential latent fingerprints, they should be worn over the latex gloves.
- f. Wrap-around eye safety goggles and face masks should be worn when the possibility exists that dried or liquid blood or body fluids may strike the face.
- g. While processing crime scenes, be aware of contaminated sharps or needles.
- h. Use tape instead of staples when packaging evidence.
- i. Before releasing the crime scene, advise the property owner of the potential infection risk and advise the owner to contact a qualified cleaning service.

B. Reporting and Treating of a Bloodborne or Airborne Pathogen Exposure

1. When an exposure to bloodborne or airborne pathogens occurs involving on-duty personnel, the following procedures **shall** be followed:
 - a. The affected employee will **immediately** report the incident to his on-duty supervisor.
 - b. An Exposure Questionnaire must be completed immediately. Once completed, the Infectious Disease Exposure Consultant shall be contacted immediately.

NOTE: This type of exposure warrants quick medical attention. Delay must be avoided.

- c. The incident will be handled under the workers' compensation guidelines.
 - d. The Police Department's Designated Officer must be notified by the employee's shift end via fax and/or e-mail.
 - e. The employee will be immediately referred to the facility designated by the Infectious Disease Exposure Consultant with the Authorization for Medical Treatment form signed by the supervisor and the employee.
 - f. The treating facility will maintain all medical records in the employee's file.
 - g. The affected employee's supervisor will:
 - 1) Ensure that documentation of the incident is completed as outlined in the Workers' Compensation Checklist (NNPD Form #286).
 - 2) Ensure a copy of all documentation is forwarded to the Designated Officer.
 - h. The affected employee will complete the City's "Authorization for Medical Treatment" form.
 - i. The affected employee's supervisor will complete the City's "First Report of Injury" form and forward it to the Designated Officer.
 - j. The employee will submit a thorough "To and From" letter of the incident with all available information.
 - k. A copy of the employee's "To and From" letter will be sent to the Designated Officer, who will complete an Incident Report Form for OSHA, and keep the copy on file for future review.
2. Skin Punctures

If an employee is cut or punctured by contaminated sharps, or bitten causing a break in the skin, the risk of infection can be minimized by encouraging the wound to bleed, unless severe bleeding is occurring. Cleanse the wound using hand sanitizer, an anti-bacterial towelette, then soap and hot water. Immediately notify the supervisor of the injury and follow guidelines for exposure treatment. Contact the Designated Officer so the incident is reported on the OSHA Sharp Injury Log.

3. Treatment of a Bloodborne Pathogen Exposure

a. If an exposure incident occurs:

- 1) The employee shall contact his supervisor immediately and complete an Exposure Questionnaire, per § 32.1-45.2 of the Code of Virginia.
- 2) The supervisor will contact the Infectious Disease Exposure Consultant to determine if the incident is an actual exposure or simple contact. If it is an actual exposure, the employee will be instructed to report to the designated facility.
 - a) "*Simple contact*" - a potentially infectious material has made contact with the employee's clothing, equipment, and/or intact skin, but no "actual exposure" has occurred.
 - b) "*Actual exposure*" or exposure incident - there has been direct contact between potentially infectious blood or body fluids and an employee's blood via cuts, scrapes or bites on the employee, or through areas such as the employee's eyes, mouth or other mucous membrane. The Center for Disease Control (CDC) recommends treatment with special antiviral medication within one to two hours of contact.
 - c) In "simple contact" incidents, if the employee still requests treatment, he will be allowed to proceed to the designated facility.

4. Testing

Any exposed employee who has had a bloodborne pathogen exposure incident must be tested immediately for a baseline. This will establish that at the time of the exposure incident, there was no evidence of a communicable disease in their blood. Since the window phase of testing is different for each communicable disease, follow-up testing will vary.

a. Low risk exposures are followed for 6 months after initial treatment.

- 1) 3 days after exposure
- 2) 6 weeks after exposure
- 3) 3 months after exposure
- 4) 6 months after exposure

b. High risk exposures are followed for 6 months after initial treatment:

- 1) 3 days after exposure
- 2) 2 weeks after exposure
- 3) 6 weeks after exposure
- 4) 3 months after exposure
- 5) 6 months after exposure

c. The person whose body fluids came into contact with an employee is considered the source patient. It is important to test the source for specific bloodborne/airborne diseases. The source can be required to be tested in accordance with §32.1-45.1 of the Code of Virginia and the results may be disclosed to the employee. §18.2-62 of the Code of Virginia provides that a person may be ordered to submit to HIV and hepatitis B or C virus testing when charged with any crime involving sexual assault,

particular offenses against children, or any assault and battery in which the victim was exposed to body fluids of the person arrested.

- d. There are three ways to access the source for testing.
 - 1) If the patient is transported to a local hospital, the hospitals are usually very cooperative in such cases, testing a patient's blood as a routine procedure.
 - 2) On certain occasions blood may be drawn in the jail.
 - 3) The source can submit to testing or in certain cases a court order can be issued. Testing can be coordinated by the Infectious Disease Exposure Consultant if the necessary approvals have been obtained.

e. "Quick Test" of a Source Patient

- 1) Riverside Regional Medical Center (RRMC) can perform a "quick test" (results within an hour) to determine if a source patient is HIV positive, providing an exposed employee with faster, appropriate medical treatment.
- 2) In the event an employee comes in contact with another person's bodily fluid, the source patient's blood can be tested at RRMC. If the source patient goes to RRMC for treatment, the blood will be drawn there. If the source patient is taken to another area hospital, blood will be drawn at that hospital into three separate vials which are taken to RRMC for testing.

NOTE: If the source does not need medical treatment, he can be taken directly to the RRMC laboratory for the blood to be drawn.

- 3) The Newport News Sheriff's Department will work with the Police Department in the event of an exposure while a suspect is being booked. The nurse will draw the blood at the jail or the inmate will be transported to RRMC for blood to be drawn. If the inmate refuses to be tested, the Jail Administrator will contact the Courts for a court order. The Shift Commander at the Sheriff's Department shall be given all pertinent information (source's name, address, social security number and date of birth) for the Jail Administrator.
- 4) In all cases, the Occupational Exposure to Bloodborne Pathogens (City form) must accompany the source or the blood. If the source patient consents to have blood drawn for testing, a Source Testing Release Consent (City form) must be completed and forwarded with the blood to RRMC. A copy of the Source Patient Testing Form shall be kept at the Sheriff's Department if the blood is drawn there. An additional copy shall be forwarded to the City Human Resources Department.

NOTE: The Occupational Exposure to Bloodborne Pathogens Form may be downloaded from the City of Newport News intranet site at "<http://www.nnlocal/>", or it may be accessed on the Department's Common Drive. The Source Testing Release Consent is a 3-part form and must be obtained from the City's Human Resources Department. Copies of this form should be kept at each precinct, and in the office of the Designated Officer.

f. Confidentiality

Confidentiality of test results is required by law. The Designated Officer will retain a confidential file on each exposure incident. Contents will not be disclosed or reported to any person without the employee's written permission, except as required by law/regulation. In accordance with OSHA standards and federal law, the medical records shall be provided to the employee or the Commissioner of the Virginia Department of Labor and Industry for examination and copying.

C. Clean Up and De-Contamination of an Exposure

1. Soiled Clothing and Gear (Biohazards)

- a. Equipment such as leather gear, ASPs, handcuffs, and shoes exposed to biohazards can be cleaned with hand sanitizer at the closest police facility. Contaminated clothing and equipment may not be worn or taken home to clean; **this is a violation of federal law.**
- b. The clothing of any personnel who get blood or related by-products on their clothing while on-duty, including plainclothes contaminations, will be packaged as set out, and sent to a Department-contracted professional cleaning service. A list of these cleaning services is established by the Logistics Support Section, and will be kept at each precinct.

NOTE: Clothing and other items being submitted for cleaning will be flushed with water prior to being bagged for cleaning.

- c. The following procedure will be followed when personnel become contaminated:
 - 1) As soon as practical after being contaminated personnel will report to their duty station with a spare change of clothing.
 - 2) Soiled articles of clothing will be placed in the plastic bags marked "biohazard", secured and tied closed with an identification tag.
 - a) Bags and tags will be kept at the biohazard container in the temporary evidence areas located at South, North or Central Precincts, or at Headquarters.
 - b) Personal Protective Equipment shall be used when handling soiled items.
 - c) The bagged clothing will be placed in the biohazard container for collection.
 - 3) Personnel will thoroughly clean the areas of their person that came into contact with the blood or by-product. Showers are available at each precinct and Headquarters. If multiple employees are contaminated, only one employee at a time will be allowed into the main shower area.
 - 4) At the discretion of the immediate supervisor, personnel may or may not be instructed to return home to dress for return to work.
 - 5) The sealed bag of soiled clothing will be placed into the biohazard container.
 - 6) The bag's identification tag must be filled out completely and accurately since the bag will not be opened when delivered to the cleaning facility.

- 7) Soiled clothing containers will be checked each morning, Monday through Friday, by a Police Aide who has received special training in the handling of this clothing.
- 8) All bags of clothing will be delivered to the contracted laundry facility. The information on the attached tag will be entered into a ledger book for record keeping.
- 9) The Police Aide will take the cleaning receipt to the Designated Officer.
- 10) The Designated Officer will make copies of all clothing receipts and retain a copy in a tracking file. Once a month a copy of all cleaning receipts will be delivered to the Accounting Technician.
- 11) The Police Aide will pick-up the cleaned clothing every Friday and take it to the proper unit for return to the officer.

2. Cleaning of Soiled Clothing and Gear (Hazardous Drug Exposure)

- a. Employees whose clothing or gear has been exposed to hazardous drugs will contact Emergency Communications and request the Fire Department respond to the scene with a unit to hose down the exposed items.
- b. Leather gear, ASPs, handcuffs, shoes (and similar) exposed to a hazardous drug may be cleaned with the cool water and mild soap. Remove and secure the equipment at the incident scene to prevent airborne or surface contaminant exposure. Clean the equipment at the scene. Contaminated equipment will not be taken home to clean.

NOTE: Alcohol-based cleansers and bleach will not be used.

- c. Discard employee clothing exposed to hazardous drugs after rinsing, using a hazardous materials bag or hazardous materials disposal container. Additionally:
 - 1) The employee will remove and secure the clothing as soon as possible to prevent further contamination from the drug becoming airborne (during removal, the employee will use protective gear).
 - 2) The employee will request Fire Department response.
 - 3) If the employee exhibits signs of an overdose, emergency medical assistance will be requested immediately, to include administration of Naloxone/Narcan (OPS-327 "Opioid Antagonist Administration"). Responding personnel will be advised of the hazardous drug exposure and any information regarding the type of drug (i.e. opioid, fentanyl, fentanyl analogue, or synthetic opioid).
 - 4) The identification tag used must be filled out completely and accurately, since the bag will not be opened. Clearly indicate that the contents of the bag have been exposed to a hazardous drug. Mark the clothing for destruction.

2. Department Firearm Contamination - A Department firearm contaminated during an exposure incident must be turned into the Department Armorer as soon as possible for cleaning. A loaner weapon may be assigned to the officer until his issued weapon is cleaned.

- a. Biohazard Contamination - The officer's supervisor will have the Communications Division page the Armorer (if off-duty). The Armorer will completely disassemble, clean and reassemble the weapon. It will then be returned to the officer.

- b. Hazardous Drug Contamination – Properly secure the officer's weapon at the scene to prevent airborne contaminants. The Armorer will take precautionary exposure prevention steps.
3. Cleaning Police Vehicles
- a. Each Precinct will be outfitted with the materials necessary for officers to clean minor amounts of blood or body fluids from their police vehicle. Established personnel at each precinct have been trained in the proper biological/hazardous waste removal and disposal techniques, and are tasked with providing instruction to others in proper clean-up techniques.
 - 1) Watch Supervisors are responsible for ensuring that adequate supplies are available for this purpose. If additional supplies are needed, it shall be reported to the Watch I Supervisor, who is responsible for ordering additional supplies.
 - b. If an officer transports a prisoner, and/or observes blood or body fluids in the back of his police car, the officer will notify Communications that he is enroute to his precinct for body fluid clean-up. Communications will contact the precinct to have the authorized trained personnel available to instruct the officer in cleaning the vehicle.
 - c. Major clean-up of police vehicles
 - 1) In situations in which the necessary clean-up of the police vehicle is extreme, or outside the procedures set out for minor amounts of blood or body fluids, the officer should contact their first line supervisor.
 - 2) The first line supervisor may authorize contacting one of the Department-contracted professional cleaning services. A list of these providers is established by the Logistics Support Section, and kept at each precinct.
 - d. Police Vehicles contaminated with possible hazardous drugs will be parked and secured until cleaned.
 - 1) A supervisor will respond to the scene to determine whether HazMat procedures will be enacted.
 - 2) The Organized Crime Division (OCD) supervisor will be notified to assist in determination of whether a HazMat situation exists, or the vehicle may be secured and cleaned on site.
4. Biohazard Trash Receptacles
- a. Metal trash cans marked for Biohazard Trash are located in the evidence rooms at each precinct, and Property and Evidence.
 - b. These cans are to be used strictly for contaminated or used personal protective equipment, cleaning materials or any other matter that qualifies under the Bloodborne Pathogen Standards.
 - c. No loose trash will be placed in these containers. Secure all trash in properly marked red or biohazard plastic bags, before placing it in a can.
 - d. The Designated Officer will be responsible for ensuring that the trash is properly removed and incinerated.
5. Crime Scene Biohazards
- a. Apparatus from the Newport News Fire Department (FD) is available to wash down

- crime scenes with large amounts of blood and body fluids only on public, City and/or school property.
- b. The FD will not respond to incidents where spills are small enough to be wiped up and discarded, or on personal property.
 - c. The FD will respond to a crime scene for the purpose of wash down when the on-scene police officer in charge determines it is time to do a wash down, or just prior to the last police officer leaving the scene. They will not respond and standby until an investigation is completed.

6. Body Fluid Spills at Police Facilities

All blood or other potentially infectious materials will be considered infectious regardless of the perceived status of the source individual. Any contact with blood or other potentially infectious material will be handled as outlined in this policy.

- a. Contain or block off the area with designated signs or barriers (i.e., cones).
- b. Notify the on-duty supervisor, the Logistics Manager, and the Office of Self Insurance (if during normal working hours).
- c. Assess the situation to determine the necessary protective equipment . If needles or sharp objects are present, use tongs or forceps to pick up the object(s) and place it in a “sharps” container. **DO NOT RECAP NEEDLES.**
- d. A bio-waste disposal company may be called (if necessary) for small biohazard spills. The contracted bio-waste disposal company should be called for gross biohazard spills (see addendum).
- e. For major biohazardous outside spills, contain the area and notify the Fire Department.

7. Training

The Training Section is responsible for ensuring training is available in the minimization of exposure to communicable disease, and hazardous drugs, to include the proper techniques for biological/hazardous waste removal and disposal.

Steven R. Drew
Chief of Police

Contact Information for Infectious Disease Exposure Consultant	
Mary Immaculate Occumed	
Denbigh Med Care Center 14703 Warwick Boulevard Newport News, VA 23608	
<i>Phone:</i> (757) 886-6633	
<i>Regular Hours:</i> Available Monday - Friday 0800-1900 Hours: (757) 886-6633	
<i>After Hours Pager:</i> (757) 667-0007, followed by *999 (wait for the return call)	
NOTE:	If the infectious Disease Exposure Consultant does not return the call after five minutes, call the following back-up phone numbers in this order: 1. (757) 489-8638 2. (757) 881-2406

Bio-Hazard Material Spills Contacts

City Owned Buildings: Logistics Manager (Dept. only)

Non-City Owned Bldg.: Contact the Property Manager or Owner

Police Vehicle Biohazard Clean-Up
VENDOR
Dr. Vinyl 729 Industrial Park Drive Newport News, VA 23608
<i>Phone:</i> (757) 868-8840
<i>After Hours:</i> Representative Jeanie Oaks (757) 713-0671

Police Uniforms & Duty Gear Professional Biohazard Cleaning
VENDORS
Nam's Cleaners 13002 Warwick Boulevard, Suite C Newport News, VA 23602
<i>Phone:</i> (757) 269-0686
Chos' Cleaners- 15509 Warwick Boulevard Newport News, VA 23608
<i>Phone:</i> (757) 887-0923
Jefferson Cleaners 12878 Jefferson Avenue Newport News, VA 23608
<i>Phone:</i> (757) 886-9100