

BEAVERTON POLICE DEPARTMENT

GENERAL ORDER

NUMBER: 8.04.00
SUBJECT: INFECTIOUS DISEASE
EFFECTIVE: AUGUST 1, 1999
REVIEW: AUGUST 2001, 2003, 3005, 2007

1. PURPOSE OF POLICY. The City recognizes that its members are entitled to a safe working environment. Employees and job applicants who are HIV (human immune deficiency virus) carriers or are afflicted with ARC (a stage prior to AIDS) or AIDS (acquired immune deficiency syndrome) or other infectious disease, are entitled to compassion and legal protection against unlawful discrimination. Based on these principles, the department has formulated this policy to:

- A. Prevent unlawful discrimination;
- B. Educate members about the ways to which disease is, and is not, spread;
- C. Designate a person to whom concerned members can go for information;
- D. Insure the confidentiality of information about any member who contracts HIV;
- E. Address employment concerns of infected members;
- F. Assure that the public is accommodated and that the risks to health are minimized;
- G. Protect the health and safety of all members through a program of universal precaution; and
- H. Avoid disruption or interference with city business that could result from unfounded health concerns.

This policy addresses the work place and shall be supplemented with any additional protocols found appropriate in the public safety departments.

2. NONDISCRIMINATION IN HIRING. The city will not unlawfully discriminate against persons with an infectious disease on the basis of their handicap if it is subject to reasonable accommodation. The following practices are to be followed:

- A. Job applicants are not to be asked whether they have a particular disease. They may be asked if they have any physical or mental impairments which would prevent them from doing the job for which they are applying. If they are impaired, they may be asked what sort of accommodation would enable them to perform the job. If accommodation is required, its reasonableness will be assessed by management.
 - B. Job applicants who disclose that they have AIDS or are HIV infected shall be asked if they can do the job applied for and whether any sort of accommodation is required. The reasonableness of any requested accommodation shall be determined by the city.
 - C. Any applicant known by the city to be handicapped but capable of performing the duties of the job sought, with or without reasonable accommodation, shall be given the same consideration as other equally qualified applicants.
3. EMPLOYEE EDUCATION. The city will strive to provide the following sources of education about transmission of AIDS and HIV and other infectious diseases, in order to educate members about the medical risks poses by such disease..
- A. Informational materials designed to answer specific questions;
 - B. Videotaped and/or live presentations; and
 - C. Confidential access to a designated contact person trained to answer questions or obtain additional information.

Employees are strongly urged to take advantage of these resources.

4. THE DESIGNATED CONTACT PERSON. The city will have a designated contact person, who will be trained to address infectious disease concerns. At present this person is the occupational health nurse.
5. CONFIDENTIALITY. The city recognizes that a member's health concerns are confidential. Members who have been infected with or exposed to an infectious disease may contact the designated contact person confidentially. Medical information will be kept confidential and consistent with legal, medical and management practices.

Employees who obtain knowledge that a member or citizen is a HIV carrier or is afflicted with ARC or AIDS shall maintain appropriate confidentiality of such information. Members shall disclose such information to those assuming custody of a citizen or rendering medical aid. Failure to do so will result in discipline if the circumstances warrant.

6. EMPLOYMENT CONCERNS OF INFECTED EMPLOYEES. Employees who are infected may contact the designated contact person for confidential information about the potential impact of their condition on their employment. The city will try to accommodate members. The reasonableness of any proposed accommodation will be determined by management and shall take into consideration the health and safety of all members and citizens. Supervisors are to consult the designated contact person and obtain city authorization before making any employment decision on the basis of a member's actual or perceived infection. Discrimination against such members on the basis of their handicap or disability will not be tolerated.

Upon request, the designated contact person will assist concerned members in obtaining information about community resources and psychological counseling available to persons and families of persons with AIDS, HIV or other infectious diseases.

7. INFECTED CITIZENS. As a public service organization, the department cannot discriminate against citizens on the basis of handicap. If uniform body fluid precautions are followed rigorously and routinely, then the risks of accidental infection when rendering aid to an infected person is minimized. The routine activities of citizens in interactions with the city pose no measurable risk of infection to members. Discrimination against citizens with or suspected of HIV or AIDS will not be tolerated.

8. BUSINESS DISRUPTIONS DUE TO UNFOUNDED HEALTH CONCERNS. If a member refuses to work with an infected coworker or serve an infected citizen, and a supervisor decides that the coworker or citizen poses or posed no threat to the health and safety of others, continued refusal or a failure to work or other disruption of city services may result in discipline including discharge. Harassment of known or suspected infectious disease carriers is expressly prohibited and may result in discipline, including discharge.

9. OVERSIGHT. Supervisors are charged with ensuring that this order is adhered to. Complaints concerning any member's failure to comply with this policy should be brought to the attention of a supervisor, and may be raised by following the procedures relating to harassment or the handling of complaints.

10. DECONTAMINATION AND DISPOSAL. Decontamination will normally be accomplished by the use of soap and water, commercially prepared agents or a 1:9 solution of household chlorine bleach and water.

A. Personnel

1. Whenever possible, use pre-exposure anti-microbial skin barrier protection or protective gloves, masks and clothing. Wash hands thoroughly after having contact with individuals or with blood or body secretions.

2. Do not smoke, eat, or touch people or objects unnecessarily, until hands have been washed.
3. Remove disposable gloves slowly and carefully by rolling inside out. Dispose of in the garbage container lined with plastic bag. Gloves contaminated with suspect fluids should be disposed of in the “red” biohazard container.
4. Remove rings (and watch, if necessary) and clean them as you wash and disinfect hands.
5. Dry hands with paper towels and dispose of them in a garbage container lined with plastic bag.
6. Change clothing soiled with blood or body fluids, and place in a plastic bag for transport to an approved laundry.

B. Vehicles and Equipment. Some viruses and microorganisms can stay alive outside the body for weeks, so it is important to remove them from vehicle, equipment surfaces, and clothing.

1. Clothing. Clean and disinfect clothing soiled with blood and body fluid by machine washing in 160 degree F. water for 25 minutes. Chlorine bleach provides an extra margin of safety. If low temperature household laundry cycles are used, be sure to use bleach. All-fabric bleaches are effective.
2. Vehicle Surfaces.
 - a. Clean with hot soapy water and disinfect surfaces with a 1:9 chlorine bleach solution, or other veridical agent. Pay special attention to steering wheel and accessories, like radio equipment, spotlight handles, etc., that come into contact with the hands.
 - b. Blood or body fluid spills should be cleaned by gloving up, cleaning with soap and water and disinfecting with fresh 1:9 bleach solution, or other approved/provided disinfectant.

C. Waste Disposal. Potentially infectious waste includes needles and sharp objects, blood and blood products, secretions, soiled linens and dressings from infected wounds. In order to prevent the spread of disease, it is important to dispose of these materials in a safe manner. After being properly packaged, infectious waste will be transported to the fire department for pick-up by Infectious Waste Disposal.

1. Needles and sharps should be deposited in rigid, puncture-proof containers manufactured for this purpose. Dispose of syringe with needle. When containers are full, seal with strapping or duct tape and deposit in the Medical Waste Disposal bin.

2. Other contaminated materials such as clothing that have been exposed to blood or body fluids should be placed in double leak proof plastic bags. Place the first bag in a second bag and seal. The outside bag should be indicated by a red-color, or marked that its contents are potentially infectious waste. This waste should then be transported to the hospital and deposited in the infectious waste disposal bin.

3. Dispose of liquefied waste by holding container at drain level and pouring liquid slowly and carefully down the drain. Flush with water and disinfect container and sink with a 1:9 or stronger solution of bleach.

11. GENERAL SAFETY GUIDELINES. In addition to the foregoing, members shall adhere to the following guidelines:

A. Any member who has an open wound, sore or cut shall keep it properly bandaged while on duty.

B. Personnel shall promptly change and clean any clothing or uniforms that become soiled with suspected contaminated blood or body fluids.

C. Personnel who are pregnant or using medications that suppress the immune system will not be allowed to perform certain duties which would put them at risk.

D. The department shall provide necessary medical and psychological counseling for those members who have been exposed to high risk infectious diseases, such as AIDS and Hepatitis.

12. REPORTING COMMUNICABLE DISEASE. ORS requires that if, during the course of a criminal investigation, a law enforcement unit acquires information that the person who is charged with a crime or sentenced for a crime has a reportable disease, the law enforcement unit shall disclose that information to the public health authorities who shall confirm the diagnosis and notify any police officer, corrections officer or emergency medical technician who had significant exposure to the person. A reportable disease means a disease or condition, the reporting of which enables a public health agency to take action to protect or to benefit the public health.

A. The following must be immediately reported:

- Anthrax
- Botulism (foodborne)
- Diphtheria

- Outbreak of foodborne illness
 - Plague
 - Any cluster of illnesses
- B. The following must be reported within 24 hours:
- Animal bites (by possibly rabid beasts)
 - Cholera
 - Foodborne illnesses
 - Haemophilus influenzae (invasive disease)
 - Measles
 - Meningococcal disease
 - Polio
 - Rabies (animal or human)
 - Rubella
- C. The following must be reported within one working day:
- Arnebiasis
 - Botulism (infant)
 - Campylobacteriosis
 - Chlamydia trachomatis (urogenital tract infection)
 - Cryptosporidiosis
 - Escherichia coli 0157 infections
 - Giardiasis
 - Gonorrhea
 - Hemolytic uremic syndrome
 - Hepatitis (A, B, C, D, E; other)
 - Malaria
 - Pertussis
 - Pesticide Poisoning
 - Salmonellosis (including typhoid)
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- Shigellosis
 - Syphilis (infectious)
 - Trichinosis
- D. The following must be reported within one week:
- AIDS
 - Brucellosis
 - Chancroid
 - Congenital rubella syndrome
 - HIV infection
 - Lead poisoning
 - Leprosy
 - Leptospirosis
 - Listeriosis

- Lyme disease
- Lymphogranuloma venereum
- PID (acute, non-gonococcal)
- Psittacosis
- Q fever
- Rocky Mountain spotted fever
- Syphilis (non-infectious)
- Tetanus
- Tuberculosis
- Tularemia
- Yersiniosis

According to the best medical evidence available, casual work place contacts among members and citizens infected with HIV and other diseases will not result in the transmission of the virus.

The nature of the disease and its presence in society warrants a city policy, contained in Beaverton Administrative Policies and Procedures which is expanded and supplemented by these policies and procedures.

13. REPORTING EXPOSURES. An exposure occurs when protective measures have not been used or have failed. It is important to document and report exposures carefully so appropriate follow-up measures can be taken.

A. Report exposures to a supervisor immediately. The member(s) shall complete a contact report and submit it to the supervisor prior to leaving the duty assignment on the day of occurrence. All information and circumstances known to the member concerning the contact shall be listed and a detailed description of the contact shall be included. Identify relatives of the contacted person, and such person's health care provider(s) if ascertainable.

B. Report exposures to a supervisor immediately. The exposed member shall call the OHSU exposure line to report the incident and assess for further medical treatment. Report. The exposed member would be counseled and referred for appropriate treatment depending on the exposure. A copy of the exposure report shall be forwarded to the OHSU Occupational Infectious Disease Program.

Chief of Police Date