

	KANSAS CITY, MO POLICE DEPARTMENT	DATE OF ISSUE	EFFECTIVE DATE	NO.
	PERSONNEL POLICY	9-12-2014	9-12-2014	819-3
SUBJECT			AMENDS	
Policy Series 800: Member's Health On-Duty Exposure to Communicable Diseases and Physical Health Protection				
REFERENCE		RESCINDS		
PPBM: Claims for Damage to Personal Property; PI: Emergency Operations Procedures, Clandestine Laboratory Operation, Explosive Device Calls, Recovered Property Procedures, Patrol Procedures		PI 05-7 Physical Health Protection PPBM 819-2		

I. INTRODUCTION

- A. The department is committed to member's safety in the performance of their duties. Maximum effort will be made to provide members with information on recommended disease prevention practices and personal protective equipment.
- B. This policy establishes procedures and guidelines to follow in the event an on-duty department member sustains significant exposure to hazardous materials or communicable diseases (i.e., Tuberculosis, Hepatitis B and C, HIV, AIDS, Rabies etc.).
- C. In addition, this policy establishes protective measures for handling items that may be contaminated with a chemical or biological hazard.

II. TERMINOLOGY

- A. **Communicable Disease** – A disease that can be transmitted from one person to another through direct or indirect contact.
- B. **Significant Exposure** – Is defined by the Centers for Disease Control and Prevention as:
 1. Any person-to-person contact in which a co-mingling of respiratory secretions (saliva and mucus) of the patient and emergency response personnel (ERP) may have taken place.
 2. Transmittal of blood or bloody body fluids of the patient onto the mucous membranes (mouth, nose, eyes) of the ERP and/or into breaks of the skin of the ERP.
 3. Transmittal of other body fluids (semen, vaginal secretions, amniotic fluids, feces, wound drainage, or cerebral spinal fluid) onto the mucous membranes or breaks in the skin of the ERP.
 4. Any non-barrier unprotected contact of the ERP with mucous membranes or non-intact skin of the patient.

III. POLICY

- A. Members should always take appropriate precautions to reduce the risk of contracting communicable diseases or exposure to hazardous materials when assisting the public, rendering first aid, arresting suspects, investigating crime scenes, and when recovering property or evidence.
- B. Individuals who have communicable diseases may or may not display overt symptoms. Risks related to contracting communicable diseases can be greatly reduced through careful hand washing and by taking preventive measures to reduce exposure, including wearing personal protective equipment.
- C. Any department member, who knowingly encounters a citizen who is suspected of having a communicable disease or becomes aware of another member who may have been exposed to a communicable disease while on-duty, will immediately contact their supervisor.
- D. The department authorized occupational health care provider will coordinate all treatment of those members who come in contact with citizens infected with a communicable disease.
- E. When a member sustains significant exposure to a communicable disease or suspects an individual may have a communicable disease, the member or designee will complete a Communicable Disease Exposure Report Form, MO 580-1815, upon arrival to the medical facility.
- F. If hospitalization is required, the member will be instructed by the department authorized occupational health care provider to respond to one of the approved medical facilities.
- G. When a period of convalescence and/or isolation is required due to an on-duty exposure to a communicable disease, the member will be placed on Injury Leave in accordance with the current written directive entitled, "Injury Leave."
- H. If a member exposed to a communicable disease is certified to work in a limited duty capacity, the department's limited duty policy will apply. Members certified to a limited duty status will refer to the current written directive entitled, "Limited Duty."
- I. Members will recover property contaminated with blood or body fluids in accordance with the written directive entitled, "Recovered Property Procedure."

- J. Necessary protective equipment will be worn while gathering and packaging contaminated items.
- K. Packages containing contaminated items shall be sealed with orange evidence tape to indicate contamination.

IV. GUIDELINES

- A. Members will immediately inform their supervisor of an on-duty encounter with an individual suspected of having a communicable disease.
- B. During regular Operating Hours:
 - 1. The member's supervisor will notify the department authorized occupational health care provider of all pertinent information regarding the member's contact with a citizen suspected of having a communicable disease.
 - 2. Upon the recommendation of the department authorized occupational health care provider, the supervisor will send the affected member(s) to the department authorized occupational health care provider site for treatment.
 - 3. The member or a designee must complete a Communicable Disease Exposure Report Form, MO 580-1825, upon arrival to the medical facility.
- C. During hours that the department authorized occupational health care provider is closed:
 - 1. The member's supervisor will notify the medical personnel at a department authorized hospital.
 - 2. The member or a designee must complete a Communicable Disease Exposure Report Form, MO 580-1825, upon arrival at the medical facility.
 - 3. Upon determining the type of communicable disease the member(s) were exposed to:
 - a. The department authorized hospital will recommend immediate treatment at their facility, or

- b. Refer the member(s) to the department authorized occupational health care provider for treatment on the next business day.
 - c. The supervisor will send the affected member(s) to the appropriate site based on the recommendation of the department authorized hospital.
- D. The member will complete an Interdepartment Communication, Form 191P.D.
- E. A copy of the Form 191 P.D., will be forwarded directly to the Employee Benefits Section (EBS). The original will be forwarded through the chain of command to the EBS. The 191 will include the following information:
 - 1. The circumstances concerning the encounter, including the known or suspected nature of the disease.
 - 2. The name and address of the infected citizen.
 - 3. The name, address, and telephone number of the physician who is treating the infected citizen, if known.
 - 4. The name and serial number of all members who have come into contact with the individual suspected of being infected with a communicable disease.
 - 5. Any recommendations, diagnosis, and/or treatment given by the department authorized occupational health care provider or department authorized hospital.
- F. Any member who initially obtains information regarding an arrestee's suspected communicable disease will access the Corrections Management System (CMS) and ask the arrestee a series of health questions. The CMS system will serve to alert any member subsequently contacting the arrestee to the possibility of a communicable disease.
- G. If the arrestee is released to an outside agency, the desk sergeant or Detention Unit Supervisor will review the CMS file and provide a copy of the health question screens to the outside agency.

- H. When an autopsy reveals a communicable disease is present in a dead body, and a member has come into contact with the body, the appropriate medical examiner/coroner will notify the Supervisor in the Human Resource Division, Employee Benefits Section or the KCPD's Office of General Counsel. Refer to the MOU between the KCPD and the Jackson County Medical Examiner's Office.

- I. The department authorized occupational health care provider will:
 - 1. Coordinate treatment of those members who have been exposed to a communicable disease.
 - 2. Receive information regarding individuals suspected of having a communicable disease and verify that information with the appropriate medical facility and/or authority.
 - 3. Notify the EBS Supervisor of any information obtained from the various medical facilities and/or authorities.
 - 4. Notify other agencies of contact their members may have had with the individual.
 - 5. Notify the appropriate health agencies of individuals infected with a communicable disease.

- J. Precautions
 - 1. Members shall use discretion to limit their exposure to contagious diseases and hazardous substances.
 - 2. Protective disposable gloves and other personal protection equipment are to be used by members to prevent transmission of contagious diseases and hazardous substances. Direct contact with blood, other body fluids, and hazardous or unknown substances should be avoided whenever possible.
 - 3. When a member is exposed to a communicable disease, there are certain vaccinations that can be administered.
 - 4. Members shall not eat, drink, smoke, or chew tobacco at crime scenes.
 - 5. Members are to be aware that certain prescribed medications (e.g. steroids and asthma medications) may suppress the immune system and cause increased susceptibility to communicable diseases. Members should consult with their private physician if they are taking prescription medications.

6. Pregnant members are advised to report any direct contact with body fluids in the line of duty to their physician.

K. Protective Equipment

1. Protective equipment should be used in addition to using caution and maintaining good hygiene and cleaning practices.
2. Members shall ensure that department vehicles are stocked with the proper protective equipment.
3. Disposable gloves provide barrier protection from blood and other body fluids. Members are to be aware that some types of disposable gloves, such as latex, provide limited protection only from certain chemicals and corrosive substances.

Disposable gloves should be worn when:

- a. Searching persons or vehicles.
- b. Administering first aid.
- c. Handling evidence or contaminated property items.
- d. Handling items such as used mouthpieces from an alcohol breath test machine or tubes of blood obtained for evidence.
- e. Handling known or suspected narcotics/narcotics paraphernalia.
- f. There is contact with body fluids, including blood, oral secretions, vomit, urine, feces, or contaminated objects.
- g. The member feels the use of gloves is appropriate.
- h. Disposable gloves offer minimal protection from needle punctures or cuts from sharp objects. Particular care should be used when handling or searching for or near needles or other sharp objects while wearing disposable gloves.
- i. Personal gloves should not be substituted for disposable gloves. Members are to be aware that if personal gloves become contaminated they should be thoroughly cleaned prior to re-using or discarded.

4. Laerdal Pocket Masks assist in providing ventilation for a non-breathing adult, child, or infant. The mask eliminates the need for traditional mouth-to-mouth contact during Cardiopulmonary Resuscitation (C.P.R.) rescue breathing.
To use the laerdal pocket mask:
 - a. When applying the laerdal pocket mask, ensure that the subject's mouth and nose are completely covered.
 - b. Prepare by pushing out the mask dome.
 - c. Install the one-way valve on the mask port.
 - d. Tilt the non-breathing subject's head backwards and place the mask over the subject's nose and open mouth. Clamp the mask to the subject's face with both thumbs on the sides of the mask. Using the index, middle, and ring fingers, grasp the subject's lower jaw just in front of the earlobes, and pull forcefully upward to open the airway.
 - e. Blow through the mouthpiece until the subject's chest rises.
 - f. Release the mouthpiece to allow the subject's exhalation to pass through the exit port on the one-way valve.
 - g. Continue C.P.R.
 - h. Disposable gloves should be worn when using the laerdal pocket mask.
5. Disposable paper masks protect the mucous membrane of the mouth and nose from exposure to blood or body fluid.
 - a. Disposable paper masks should be used:
 - (1) When there is a possibility of airborne pathogens, blood, or other body fluid while rendering first aid.
 - (2) When a member is in the immediate area of a dead body in an advanced state of decomposition (e.g., in the same room with or working directly within an open area).
 - (3) When conducting investigative duties around dead bodies in the morgue.

- (4) When a member comes into contact with a person who has Tuberculosis.
 - b. When applying the disposable paper mask, ensure that both the mouth and nose are completely covered.
 - c. Disposable gloves should be worn when using the disposable paper mask.
6. For information regarding the Dupont "Tychem F" chemical resistant suit and accompanying equipment, see the written directive entitled, "Emergency Operations Procedure."

L. Protective Equipment Disposal

1. Members will ensure the proper disposal of disposable protective equipment that they have used.
2. Upon leaving an emergency scene, disposable gloves shall be removed and placed in an appropriate disposal container as soon as possible.
3. Used disposable equipment shall be disposed of during the member's tour of duty.
4. Members utilizing disposable equipment will be responsible for securing replacement equipment as soon as possible.
5. Locations of disposal containers marked "Contaminated Material":
 - a. Police Headquarters
 - (1) Violent Crimes Division
 - (2) Detention Unit
 - b. Police Service Station
 - c. Regional Criminalistics Division (KCMO Police Crime Lab)
 - d. All patrol division stations
 - e. Traffic Unit

M. Hygiene and Cleaning Practices

1. Cleaning Solutions

- a. Soap and water - To be used for removing transient microorganisms acquired by direct or indirect contact on the skin. Soap and water provide an effective means of self-protection and should be used in preference to other skin cleansing solutions.
 - b. Alcohol Disposable antimicrobial hand wipes or antibacterial hand sanitizer solution should be used when soap and water are not available for cleansing the skin. When soap and water become available, the skin should be re-washed.
 - c. Household Bleach - A solution of one part sodium hypochlorite (household bleach) and ten parts water is effective for cleaning counter tops and other surfaces that may have been contaminated with blood or other body fluids.
 - d. Disinfectants - Disinfectants that have a chemical germicide registered with the Environmental Protection Agency, such as a "hospital disinfectant" spray, should be used to clean equipment items, counter tops, or other surfaces that may have been contaminated with blood or other body fluids.
2. Washing exposed areas of the skin on a regular basis provides a high degree of protection. Hand washing is most important, even if gloves are worn. Hands should be washed after:
- a. Touching another person.
 - b. Touching inanimate objects likely to be contaminated by blood or other body fluids.
 - c. The use of antimicrobial hand wipes or antibacterial hand sanitizer solution (when soap and water becomes available).
 - d. Using any restroom facility.
3. When soap and water are not immediately available, antimicrobial hand wipes and/or antibacterial hand sanitizer solution shall be used:
- a. After removing disposable gloves.
 - b. An exposed area of skin contacts a surface potentially contaminated with blood or body fluids (wet or dry).

- c. The skin is punctured, torn, or cut.
 - d. After using restroom facilities.
4. Viruses including Hepatitis and HIV/AIDS can survive for extended periods of time on surfaces at room temperature. Good hygiene practices including regular bathing, maintaining a clean uniform, etc., should be adhered to.

N. How Diseases Are Transmitted

1. Hepatitis B - Transmitted through contact with blood or other bodily fluids.
 2. Hepatitis C – Transmitted through exposure to blood.
 3. Human Immunodeficiency Virus (HIV) – Transmitted through contact with blood or other bodily fluids.
 4. Tuberculosis (TB) – Transmitted through the air from one person to another.
 5. Rabies – Transmitted through saliva or brain/nervous system tissue (usually if bitten by an infected animal). Rabies is transmitted only when the virus is introduced into a bite wound, open cuts in skin, or onto mucous membranes such as the mouth or eyes.
 6. Any clothing item contaminated with blood or other body fluids should be removed and cleaned as soon as practically possible.
 7. Chemical dry cleaning should be adequate to decontaminate clothing. Notify the dry cleaner of any blood or body fluid stains in advance so that the appropriate chemicals can be used for removal.
 8. Clothing reimbursement will comply with the written directive entitled, “Claims for Damage to Personal Property.”
- O. Timeframe a member should be vaccinated after exposure or diagnosis of a communicable disease:
1. Hepatitis B – Within two days.
 2. Hepatitis C – Vaccine is not available.
 3. HIV – Within two days.

4. Tuberculosis (active disease) – Within four hours.
 5. Rabies – As soon as possible after exposure, ideally prior to onset of symptoms.
- P. Vaccinations for exposure to Hepatitis B, Tuberculosis, HIV, and Rabies
1. Hepatitis B – Three intramuscular injections. The second and third injection administered one and six months after the first.
 2. HIV – Antiretroviral Therapy (ART).
 3. Tuberculosis – Bacille Calmette-Guerin (BCG) vaccine.
 4. Rabies - One dose of immune globulin and four doses of Rabies vaccine over a 14 day period.
- Q. Equipment and Department Facilities
1. All members are responsible for keeping their equipment, vehicle, and/or assigned work area clean and free of soil, trash, or other residue.
 2. When police vehicles become contaminated with blood, bodily fluids, or airborne pathogens such as Tuberculosis, the Zep First Defense Body Fluids Clean-Up Kit will be utilized. Kits are located at each patrol division station.
- R. Persons In-Custody
1. Members are to use caution when conducting searches of persons and vehicles to prevent skin punctures by needles/drug paraphernalia and other sharp objects. Extreme caution must be used:
 - a. When searching suspected drug users/dealers and persons who engage in prostitution or other high-risk activities.
 - b. When reaching into areas that are not visible, such as under car seats.
 2. At the completion of a search where protective disposable gloves were used, carefully remove the gloves and place them in a disposal container marked “Contaminated Material,” or in a red plastic bag.

3. To prevent possible transmission of communicable diseases, a protective helmet with a protective shield will be placed on arrestees who attempt to spit, bite, or head butt members. The protective helmet must be cleaned after each use, or as soon as practical.
4. If a member determines that an arrestee has been diagnosed with Tuberculosis, the member will:
 - a. Put on a particulate respirator mask (orange side up).
 - b. Wear a pair of disposable gloves.
 - c. Put a particulate respirator mask (orange side up) on the contagious person, ensuring the mouth and nose are completely covered.
 - d. Dispose of used particulate respirator masks and gloves in a red plastic bag designated for hazardous materials.
5. Detention facility officers (DFO), or sworn members who are pre-booking, will ask the arrestee medical questions to confirm the communicable disease information.
6. Once an arrestee has been booked and processed, a red wrist band will be placed on the person's wrist if the arrestee has been diagnosed with, or believe that they have, any of the following conditions:
 - a. Hepatitis
 - b. AIDS
 - c. HIV
 - d. Tuberculosis
 - e. Any major medical illness (e.g., previous heart attack)
7. The arrestee's ailment code will be indicated on their red wrist band.

8. In cases where the Metro Meth Section has responded to a scene and determined that the scene and the arrestee are contaminated, the Metro Meth Section chemist will take the arrestee's contaminated clothing and issue a paper suit. The chemist will then respond to the Environmental Management/Household Hazardous Waste Center for disposal of the contaminated clothing.
9. Sworn members will notify the booking officer and detention personnel when it is determined that an arrestee has a communicable disease.
10. Members will inform other support personnel (firefighters, paramedics, outside agency personnel, etc.) whenever transfer of custody occurs and the subject has blood or body fluids present on their person or if the subject has made a voluntary statement that they have a communicable disease.

S. Chemical or Biological Hazards and Suspicious Substances

1. Members will exercise extreme caution and use sound judgment when dealing with situations involving chemical or biological hazards and suspicious substances. A supervisor will be notified and the appropriate department element or other resource will be requested (e.g., Fire Department Hazmat Team, Bomb and Arson Section, Metro Meth Section).
 - a. If a suspicious powder or liquid substance is discovered and it is necessary to handle the material, the member should wear the department issued gas mask and disposable gloves. Members are cautioned that the chemical resistance level of disposable gloves varies by type. Latex disposable gloves are generally not rated for protection against corrosive substances and may not be an effective barrier for certain substances.
 - b. Carefully place the substance into a plastic bag or other type of container to prevent leakage of contents (if necessary).
 - c. Do not shake or empty the contents of a suspicious package or envelope. To be effective, some substances must be airborne (e.g., anthrax).
 - d. Do not transport hazardous or suspicious materials to a department facility.
 - e. Do not attempt to clean up any spilled powders or liquids.

2. Members are cautioned that mixing certain substances with water can cause a dangerous and harmful reaction. Request an ambulance for medical evaluation if any powders or fluids have transferred onto skin and the substance is volatile or reaction to soap and water is unknown.
3. If a member is contacted by a citizen who is concerned about possible exposure to a hazardous substance, the member will advise the party to seek immediate medical attention or request an ambulance for the party if needed or requested.
4. If hazardous materials or radiation are determined to be present, refer to the written directives entitled, "Emergency Operations Procedure" and "Patrol Procedures," for further instructions.
5. If an explosive device is suspected or encountered, refer to the written directive entitled, "Explosive Device Calls," for further instructions.

Darryl Forté
Chief of Police

Adopted by the Board of Police Commissioners this _____ day of _____, 2014.

Alvin Brooks
Board President

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