

# Communicable Diseases

## 903.1 PURPOSE AND SCOPE

This policy is intended to provide guidelines for facility staff to assist in minimizing the risk of contracting and/or spreading communicable diseases. The policy offers direction in achieving the following goals:

- (a) Managing the risks associated with bloodborne pathogens (BBP), aerosol transmissible diseases (ATD) and other potentially infectious substances.
- (b) Providing appropriate treatment for ill inmates while minimizing the risk of the spread of disease.
- (c) Making decisions concerning the selection, use, maintenance, limitations, storage and disposal of personal protective equipment (PPE).
- (d) Ensuring proper reporting to local, state and federal agencies.
- (e) Establishing procedures for the identification, education, immunization, prevention, surveillance, diagnosis, medical isolation (when indicated), treatment and follow-up care for new inmates, and for inmates or employees who have contracted a communicable disease from an ill inmate.
- (f) Providing appropriate treatment, counseling and confidentiality should an employee become exposed to a communicable disease.
- (g) Protecting the privacy rights of all personnel who may be exposed to or contract a communicable disease during the course of their duties.

### 903.1.1 DEFINITIONS

Definitions related to this policy include:

**Aerosol transmissible disease (ATD)** - A disease or pathogen for which droplet (whooping cough, influenza, streptococcus) or airborne (measles, chickenpox, tuberculosis) precautions are required.

**Aerosol transmissible disease (ATD) exposure** - Any event in which all of the following has occurred:

- An employee has been exposed to an individual who has or is suspected to have an ATD, or the employee is working in an area or with equipment that is reasonably expected to contain aerosol transmissible pathogens associated with an ATD.
- The exposure occurred without the benefit of applicable exposure controls required by this section.
- It reasonably appears from the circumstances of the exposure that transmission of disease is likely sufficient to require medical evaluation.

**Airborne precautions** - Include the use of an Airborne Infection Isolation Room (AIIR) that meets the American Institute of Architects/Facility Guidelines Institute (AIA/FGI) standards for AIIRs, for

# Shasta County Sheriff's Office

Shasta County SO Custody Manual

## *Communicable Diseases*

---

infectious agents such as measles, chickenpox, tuberculosis, etc., in addition to medical personnel wearing masks or respirators.

**Bloodborne pathogens (BBP)** - Pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV), hepatitis C virus (HCV) and human immunodeficiency virus (HIV).

**Bloodborne pathogen exposure** - Includes, but is not limited to, the contact of blood or other potentially infectious materials with the eye, mouth, other mucous membranes, non-intact skin, needle sticks, human bites, cuts, abrasions or any contact with blood or body fluids that is synonymous with bloodborne pathogen exposure as defined by the federal Centers for Disease Control and Prevention (CDC).

**Ectoparasitic infections** - Parasites that live on the skin, such as lice (pediculosis) and scabies (sarcoptic mange). Both infections are communicable and may lead to secondary infections.

**HBV** - Hepatitis B

**HIV** - Human Immunodeficiency Virus

**Medical isolation** - Housing in a separate room with a separate toilet, hand-washing facility, soap and single-service towels, and with appropriate accommodations for showering.

**NIOSH** - National Institute for Occupational Safety and Health

**Nosocomial** - Acquired during hospitalization. Nosocomial infections are infections that present 48 to 72 hours after admission to a hospital.

**OSHA** - Occupational Health and Safety Administration

**Personal protective equipment (PPE)** - Respiratory equipment, garments, gloves and other barrier materials designed to reduce employee exposure to hazards.

**Source control measures** - The use of procedures, engineering controls and other devices or materials to minimize the spread of airborne particles and droplets from an individual who has or exhibits signs or symptoms of having an ATD.

**Standard precautions** - Infection control practices used to prevent the transmission of disease that can be acquired by contact with blood, bodily fluids, non-intact skin (including rashes) and mucous membranes. Applies to all inmates receiving care, regardless of diagnosis or presumed infection status.

**Universal precautions** - A set of precautions designed to prevent transmission of HIV, HBV and other bloodborne pathogens when providing first aid or health care.

### **903.2 PRECAUTIONS**

# Shasta County Sheriff's Office

Shasta County SO Custody Manual

## *Communicable Diseases*

---

### 903.2.1 STANDARD PRECAUTIONS

Standard precautions shall be used by health care practitioners to minimize the risk of exposure to blood and bodily fluids of infected patients. The health authority shall be responsible for establishing basic guidelines including, but not limited to (15 CCR 1206.5(b)(4)):

- Washing hands or using hand sanitizer before and after all patient or specimen contact.
- Handling all blood and bodily fluids such as saliva, urine, semen and vaginal secretions as if they are known to be infectious. Where it is not possible to distinguish between body fluid types, all body fluids are to be assumed infectious.
- Wearing gloves for potential contact with blood and other bodily fluids.
- Placing used syringes immediately in a nearby, impermeable container. Do not recap or manipulate any needle in any way.
- Wearing protective eyewear and a mask if splatter with blood or other body fluids is possible.
- Handling all linen soiled with blood and/or bodily secretions as infectious.
- Processing all laboratory specimens as infectious.
- As appropriate, wearing a mask for TB and other ATDs.

### 903.2.2 TRANSMISSION-BASED PRECAUTIONS

Transmission-based precautions may be needed in addition to universal precautions for selected patients who are known or suspected to harbor certain infections. These precautions are divided into three categories that reflect the differences in the way infections are transmitted. Some diseases may require more than one category.

- (a) Airborne precautions are designed to prevent the spread of ATDs, which are transmitted by minute particles called droplet nuclei or contaminated dust particles. These particles, because of their size, can remain suspended in the air for long periods of time, even after the infected person has left the room. Some examples of diseases requiring airborne precautions are TB, measles and chicken pox.
  1. An inmate requiring airborne precautions should be assigned to a designated respiratory isolation room with special ventilation requirements. The door to this room must be closed at all possible times. If an inmate must move from the isolation room to another area of the facility, the inmate should wear a mask during transport. Anyone entering the isolation room to provide care to the inmate must wear a respirator.
- (b) Droplet precautions are designed to prevent the spread of organisms that travel on particles much larger than the droplet nuclei. These particles do not spend much time suspended in the air, and usually do not travel beyond a few feet of the inmate. These particles are produced when an inmate coughs, talks or sneezes. Examples of disease requiring droplet precautions are meningococcal meningitis, influenza, mumps and German measles (rubella).

# Shasta County Sheriff's Office

Shasta County SO Custody Manual

## Communicable Diseases

---

1. All staff should wear masks within 3 feet of the inmate. Inmate movement should be restricted to the minimum necessary for effective facility operations. The inmate should wear a mask during transport.
- (c) Contact precautions are designed to prevent the spread of organisms from an infected inmate through direct (touching the inmate) or indirect (touching surfaces or objects the inmate touched) contact. Examples of inmates who might be placed in contact precautions are those infected with the following:
  1. Antibiotic-resistant bacteria
  2. Hepatitis A
  3. Scabies
  4. Impetigo
  5. Lice

The following guide shall be used to determine the appropriate precautions that are necessary to reduce the risk of infection transmission while inmates are being transported. Inmates shall receive training on the disease transmission process and will be provided with appropriate barrier devices.

### Precautions for Inmate Contact and Transportation

	<b>GLOVES</b>	<b>SURGICAL MASKS</b>	<b>N95 MASKS</b>	<b>ISOLATION GOWNS</b>
<b>Contact</b>				
Inmate	No	No	No	No
Personnel	Yes	No	No	Yes
<b>Droplet</b>				
Inmate	No	Yes	No	No
Personnel	No	Yes	No	Yes
<b>Airborne</b>				
Inmate	No	Yes	No	No
Personnel	No	No	Yes	No

### 903.3 ECTOPARASITE CONTROL

Ectoparasite control will be initiated, where clinically indicated, immediately following the medical screening or when the inmate manifests signs and symptoms of lice or scabies (15 CCR 1212).

- (a) Any inmate who indicates parasitical infection upon entering the facility shall be treated by a qualified health care professional.
- (b) Any inmate suspected of having lice/scabies may be referred to sick call by a correctional deputy.
- (c) An inmate may access sick call if he/she believes there is a problem with lice/scabies.

# Shasta County Sheriff's Office

Shasta County SO Custody Manual

## Communicable Diseases

---

- (d) A qualified health care professional shall evaluate any inmate with a lice/scabies complaint. If there are positive findings, the inmate shall be treated for the infestation accordingly.
  - 1. The lice and scabies treatment guidelines will be followed by the qualified health care professional, if a physician's order for the medication administration is obtained.
    - (a) The prescribing physician shall be notified if the inmate is pregnant, as certain medications are contraindicated for pregnant women. An alternative topical application must be prescribed in these situations.
    - (b) Documentation in the medical record should include the patient's symptoms, observations regarding the condition, patient education and prescribed treatment.
  - 2. The inmate's clothing and linen shall be removed from his/her cell placed in a plastic bag and sent to the laundry. These items are considered contaminated and must be disinfected by:
    - (a) Machine washing (hot cycle), machine drying (hot cycle), dry cleaning or ironing, or
    - (b) Storage in a plastic bag for non-washable items for 10-14 days (head lice), seven days (pubic lice). This method is not recommended for body lice.
    - (c) Isolation is not necessary as long as clothing and bedding are properly disinfected and inmates do not share items.
      - 1. An inmate having poor hygiene should be housed in a single cell until 24 hours after beginning treatment.
      - 2. Gloves are to be used for direct contact until the inmate has been treated and the clothing/bedding have been removed for disinfecting.
  - 3. Cell mates, sexual partners and any personnel having direct hands-on contact with an infected inmate should be evaluated for prophylactic treatment because of the long incubation period of the scabies parasite.

### 903.4 FOOD

Persons with active Hepatitis A or Tuberculosis, shall use paper plates, cups and disposable utensils.

After use, inmates shall place all leftover food, plates, cups and utensils in their plastic trash bag.

### 903.5 MANAGEMENT OF INMATES WITH COMMUNICABLE DISEASES

If an arrestee discloses, at the time of booking or intake, or if that inmate has observable symptoms of a communicable disease, including but not limited to tuberculosis, other airborne diseases, hepatitis, or other special medical problems identified by a health authority, medical staff shall be

# Shasta County Sheriff's Office

Shasta County SO Custody Manual

## *Communicable Diseases*

---

notified to evaluate their status. Any response concerning communicable diseases shall be noted on the medical screening form.

All inmates suspected of having a communicable disease shall be separated and placed in individual isolation until a medical evaluation can be completed. Appropriate precautions are to be taken by staff to prevent further spread or contamination to staff and the custody setting.

If the inmate is not a cite/release, the inmate will be scheduled for sick call as soon as possible by the reviewing medical staff.

In the event of a cite/release, the arrestee will be released utilizing the established cite procedures with the exception of being kept separate from other inmates including other cite/releases.

Notification of Marshals Office upon Confirmation of Airborne Communicable Disease:

When it has been confirmed by medical staff that a person in the custody of the Sheriffs Office has an airborne communicable disease, the Marshals Office will be notified.

If the infected person has a continuing court case, Jail Administration will call the Marshals Office Dispatch at (530) 225-5600 and speak with the immediate supervisor on duty.

Notification will be given that the person has a communicable disease.

If the infected person has been in court while incarcerated but does not have any pending court cases after the confirmation, Jail Administration will call the Marshals Office Dispatch and speak with the immediate supervisor on duty. Notification will be given that an inmate with an airborne communicable disease has been to court and if possible, the date of appearance will also be given.

### 903.5.1 MANAGEMENT OF INMATES WHO TEST POSITIVE FOR HIV VIRUS

If there is NO evidence of physical disease, as determined by the medical staff, the inmate shall be placed into general population by classification and medical staff and cautioned not to share their results with anyone for their own personal protection.

## **903.6 CONFIDENTIALITY**

### 903.6.1 PROVISIONS REGARDING INMATE EXPOSURE TO AIDS, HIV, HBV, AND OTHER COMMUNICABLE DISEASES

No staff member shall disclose the results of any inmates AIDS, HIV, or HBV testing information beyond the scope of their job capacity or legal authority. Disclosure means to release, transfer, disseminate or otherwise communicate all or any part of any record, orally, in writing, or by electronic means, to any person or entity. The disclosure of the results of a blood test means to identify or provide identifying characteristics of the person to whom the results apply.

In the event it becomes necessary in the course of a staff members job duty to inform another staff member, Deputy marshal, or federal marshal of the status of an inmate, that staff member shall inform them of the status.

# Shasta County Sheriff's Office

Shasta County SO Custody Manual

## *Communicable Diseases*

---

### **903.7 EMPLOYEE EXPOSURE CONTROL**

All facility staff that may come in contact with another person's blood or bodily fluids shall follow these procedures and guidelines. For the purposes of this policy, contact with blood or bodily fluids is synonymous with BBP exposure.

All employees shall use the appropriate barrier precautions to prevent skin and mucous membrane exposure whenever contact with blood or bodily fluid is anticipated. Disposable gloves shall be worn, if reasonably possible, before making physical contact with any inmate and when handling the personal belongings of an inmate.

Should gloves come in contact with blood or other bodily fluids, the gloves shall be disposed of as contaminated waste. Care should be taken to avoid touching other items (e.g., pens, books and personal items in general) while wearing disposable gloves in a potentially contaminated environment. All procedures involving blood or other potentially infectious materials shall be done in a way to minimize splashing, spraying or otherwise generating droplets of those materials.

Eating, drinking, smoking, applying lip balm and handling contact lenses shall be prohibited in areas where the potential for exposure exists.

#### **903.7.1 DECONTAMINATION OF SKIN AND MUCOUS MEMBRANES**

Personnel shall wash their hands as soon as possible following the removal of potentially contaminated gloves. Antibacterial soap and warm water or an approved disinfectant shall be used, paying particular attention to the fingernails.

If an employee's intact skin contacts someone else's blood or body fluids or other potentially infectious materials, the employee shall immediately wash the exposed part of his/her body with soap and warm water and/or an approved disinfectant as soon as possible. If the skin becomes grossly contaminated, body washing shall be followed by an approved hospital strength disinfectant. If large areas of the employee's skin are contaminated, the employee shall shower as soon as reasonably possible, using warm water and soap and/or an approved disinfectant. Medical treatment should be obtained.

Contaminated non-intact skin (e.g., injured skin, open wound) shall be cleaned using an approved disinfectant and then dressed or bandaged as required. Medical treatment is required. All hand, skin and mucous-membrane washing that takes place shall be done in the designated cleaning or decontamination area. Cleaning shall not be done in the kitchen, bathrooms or other locations not designated as a cleaning or decontamination area.

#### **903.7.2 DECONTAMINATION OF CLOTHING**

Contaminated clothing such as uniforms and undergarments shall be removed as soon as reasonably feasible and rinsed in cold water to prevent the setting of bloodstains. If the clothing may be washed in soap and hot water, do so as soon as reasonably possible.

If the clothing must be dry-cleaned, place it into a biohazard waste bag and give it to the ECO. The ECO will secure a dry cleaner that is capable of cleaning contaminated clothing, and shall inform

# Shasta County Sheriff's Office

Shasta County SO Custody Manual

## *Communicable Diseases*

---

the dry cleaner of the potential contamination. The cost of dry cleaning shall be paid according to labor contract agreements.

Contaminated leather boots shall be brushed and scrubbed with detergent and hot water. If the contaminant soaked through the boot, the boot shall be discarded and replaced. The cost of replacement shall be paid according to labor contract agreements.

### 903.7.3 DECONTAMINATION OF VEHICLES

Contaminated vehicles and components such as the seats, radios and doors, shall be washed with soap and warm water and disinfected with an approved germicide as soon as reasonably feasible.