



## **Workplace Guidelines: Precautions & Procedures to Reduce the Risk of Infection from Contagious Diseases, Including HIV, Hepatitis B, and Hepatitis C**

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*In the event of a conflict between policies in GAP or PRS manuals and the procedures in any other Texas Juvenile Justice Department (TJJD) manual, guideline, or local procedure, the provisions of the GAP and PRS manuals control.*

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Standard precautions for all infectious diseases are valid and universally applicable; however, because of concerns regarding those diseases caused by bloodborne pathogens, this procedure speaks directly to precautions and procedures designed to reduce the risk of infection due to exposure to bloodborne pathogens, including HIV, hepatitis B virus (HBV), and hepatitis C virus (HCV).

The rate of accidental infection from bloodborne pathogens is very low; however, the consequences of the infection are very serious. The Centers for Disease Control and Prevention (CDC) recommends that precautions be used universally whenever there is anticipated contact with blood or body fluids and not as a result of the characteristics of an individual, such as sexual orientation, perceived drug usage, or assumed medical condition.

TJJD employees are advised to follow these procedures and precautions at all times to reduce the spread of all contagious diseases.

### **1. Searches.**

- A. Assume that every youth or area to be searched may possess a sharp object that is potentially infectious.
- B. Make a visual inspection of the youth, area, or property prior to a hand search.
  - Instruct youth to remove all items from pockets and to turn pockets inside out.
  - Ask youth about the presence of needles or sharp objects that may be concealed on his or her person or property.
  - Conduct a light pat-type search of areas where sharp objects may be located before attempting a more aggressive probing-type search.
  - Make a visual inspection of property prior to handling it. Instruct the youth to empty the contents of all containers (locker, bags, boxes, cases, and purses) before beginning a hands-on inspection.

### **2. Exposure Precautions for Infectious Diseases.**

- A. Hand Washing.
  - Hand washing is the most effective means for preventing any infection.
  - A vigorous, 15-second washing with fresh, running water with any available soap is recommended.
  - If thorough hand washing in fresh water is not possible, staff members should use germicidal or alcohol hand wipes followed by a thorough washing when practical.
- B. Barrier Precaution.
  - Barrier precautions should be used when there is an anticipated exposure to blood or body fluids. Intact skin is the most important barrier against potential infection. All skin breaks, rashes, infections, and cuts must be covered with clean, dry bandages. Bandages should be changed as soon as possible if they become wet or soiled.

C. Disposable Gloves.

Disposable latex gloves should be worn when there is a likely exposure to blood and/or other body fluids.

- Gloves contaminated by blood or other body fluids must be immediately disposed of as ordinary waste.
- Wash hands thoroughly for 15 seconds after removing gloves.
- Avoid touching eyes, nose, and mouth with contaminated gloves.

D. CPR Mask.

Although there is no documented case of HIV, HBV, or HCV infection through administration of CPR, CPR pocket masks will be made available in all buildings and security vehicles, and employees will be trained in their use.

**3. Cleaning and Decontamination.**

A. Clothing.

- The risk of HIV, HBV, or HCV transmission through clothing soiled by blood or other body fluids is negligible.
- When soiled by blood or other body fluids, clothing should be changed as soon as possible. Until clean clothing can be obtained, remove as much soilage as possible with a cloth or paper towel and warm water. Dispose of the cloth or paper towel in any trash receptacle.
- Washable clothing may be washed in any washing machine using the recommended amount of regular laundry detergent.
- Clothing that requires dry cleaning may be professionally cleaned without additional precautions.

B. Equipment.

- Disposable equipment may be disposed of as ordinary waste.
- Disposable razors are not biohazardous waste and are to be removed from the facility using normal disposal procedures.
- All razors (i.e., disposable and battery operated), when not in use, are to be stored in a container with a covered lid and in a secured area inaccessible to youth (refer to the [Bloodborne Pathogen Exposure Control Plan](#)).
- Under no circumstances are razors to be shared.
- Reusable equipment, such as handcuffs, that become contaminated with blood or other body fluids must be cleaned in accordance with [INS.45.17](#), Infection Control. Contact medical staff for direction if questions arise.

C. Disinfection.

Environmental surfaces, such as walls, floors, tables, and chairs, are not associated with transmission of HIV, HBV, or HCV. Therefore, it is not necessary to take extraordinary steps to disinfect or sterilize these surfaces. When needed, however, the following disinfection agents are suggested:

Agent	Description
Bleach*	Highly potent, fresh mix of 1 part bleach to 10 parts water
SaniZide®	A non-corrosive germicide, safe for metal surfaces
Providone Iodine (Betadine)	Potent, use as directed on container
Detergent	Potent, use as directed on container
Hydrogen Peroxide	Brief antiseptic effect, no mixing necessary
Rubbing Alcohol	Effective only when accompanied by scrubbing; no mixing necessary

\* Bleach is the solution of choice but may corrode metal surfaces if used frequently.

#### 4. Waste Disposal.

- A. Generally, waste generated by living units may be disposed of as ordinary waste. Special handling of infectious waste is necessary only when hypodermic needles, syringes, and other sharp items are involved.
- B. Needles, syringes, and other sharp medical supplies must be disposed of as biohazard waste in a puncture-proof sharps container (refer to the Bloodborne Pathogen Exposure Control Plan).

#### 5. Supplies.

The supplies necessary to comply with this procedure are:

- A. disposable latex gloves, surgical masks, and goggles for dentists; autoclave and/or acceptable disinfectant for dental equipment;
- B. puncture-proof sharps container for needles, syringes, and other sharp medical supplies; and
- C. Spill Kit (contained in 12 x 15 clear, resealable bag) consisting of:
  - 2 pairs of disposable or reusable latex gloves or any other appropriate barrier (for use during direct contact with body-fluid spills, secretions, or excretions);
  - appropriate disposal containers, including 1 disposable bag (1-mm thickness) and one red disposable bag (1.5-mm thickness) marked "contaminated";
  - liquid "hospital disinfectant" which is tuberculocidal;
  - paper towels (15–20); and
  - 1-page instruction sheet explaining use of contents of kit.

Supplies and equipment must be readily accessible by being:

- clearly identified for intended use;
  - placed in areas of potential need;
  - placed in locations within easy reach of staff; and
  - stored in containers that can be easily opened.
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